Service Request Detail

SR No.	71-597821681	**Ref No.**		**Goodwill**	No Goodwill Offered	**BRC Type**	PAR
Account	[redacted]	**Site**		**GW SubType**		**Bus. Unit**	BRC
Last Name	[redacted]	**First Name**	[redacted]	**Approval**	Not Initiated	**Area**	PAR
Daytime #	[redacted]	**Evening #**		**UCC**	Steering - General	**Sub-Area**	Initiate PAR- Collision
Address	[redacted]	**City**	Raleigh	**Involved Dlr**	Thompson Cadillac-Oldsmobile, Inc.	**Safety**	Yes
State	NC **ZipCd** [redacted]	**Con Acct**	Amica Insurance	**Source**	White Mail	**Updated**	1/31/2008 02:52:26 PM
Serial #/VIN	1G2ZG528354[redacted]	**Model Year**	2005	**Priority**	Medium **License #** PONTIAC	**Owner**	CISNERMA
Make	Pontiac	**Warr. Start**	12/30/2004	**Status**	Open	**Opened**	1/29/2008 05:24:30 PM
Model	G6	**Mileage**	56496	**Sub-Status**	Satisfied	**Closed**	
Abstract	Steering issue						
Customer Description	This is a BRC PAR Case. Please do not assume. Forward any inquiries to Matthew Cisneros at ext.21171						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Insurance Agent	10/19/2007 01:00:00	N	0	1	Asphalt	Wet	na	na

Driver	Last Name	First Name	Height	DOB	Disabilities
Arriag[redacted]			[redacted]	[redacted]	none

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Brown	Judy	(800) 892-6422	Amica Insurance

Incident Loc	Carey Glen St Carey NC	**Incident Desc**	Cust was driving, then steering locked up and and cust hit a post
Component	steering		
Vehicle Loc	with cust	**Damage Desc**	front end of veh damaged
		Add'l Info	n/a
Emgcy Svc Names	Merchant Tire Towing		
		Maint Loc	unknown

PAR Detail

Collision	Y	**Non Collision**	**Property Damage**	N	**Thermal Evt**	N	**Spec Equip**	none	
Vehicle Speed	15		**Weather Condition**	raining			**Prop Owner**	n/a	**Property Type** n/a
Last Service Date			**Loc Last Service**	N/A			**Property Location**	n/a	**Prop Est Repair Cost** $0.00
Veh Est Repair Cost	$4,519.00		**Spec Equip Installer**	n/a			**Prop Damage Description**	n/a	
Primary Veh Use	Personal		**Inspection Type**	Other			**Inspected By**	Inspection Not Performed	**Inspection Date/Time**
Veh Damage Description	drivers side body damage						**Explain Other**	n/a	

INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 02:49:08 PM	CISNERMA	CISNERMA	Scheduled Follow-up		Scheduled Alarm		71-597821681 check

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]		Amica Insurance	

Comments

check to see if case has been sent to ESIS

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 02:48:35 PM	CISNERMA	ESISBIQU	Escalation	ESIS - Insurance Involvement	In Progress		ESIS - insurance involvement

Contact Last Name	Contact First Name	Account	BAC Code
Arr[redacted]		Amica Insurance	

Comments

contact person is Judy Brown from Amica Insurance, (800) 892-6422 x45336

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 02:43:13 PM	CISNERMA	CISNERMA	Inbound Call Customer	Customer	Done	1/31/2008 02:47:09 PM	calling back

Contact Last Name	Contact First Name	Account	BAC Code
Arri[redacted]		Amica Insurance	

Comments

see initial

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 01:56:59 PM	CISNERMA	CISNERMA	Scheduled Outbound Call Cust	Cancelled	Done	1/31/2008 02:46:49 PM	71-597821681 call

Contact Last Name	Contact First Name	Account	BAC Code
Arriag[redacted]		Amica Insurance	

Comments

call (800) 892-6422 x45336 and make 2nd attempt at initial

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 01:56:39 PM	CISNERMA	CISNERMA	Outbound Call Customer	Left Message	Done	1/31/2008 01:56:58 PM	called (800) 892-6422 x4-5336

Contact Last Name	Contact First Name	Account	BAC Code
Arr[redacted]		Amica Insurance	

Co[redacted]

made acknowledgement

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 12:13:04 PM	CISNERMA	CISNERMA	Ownership Changed	Ownership Escalated to BRC	Done	1/31/2008 12:13:04 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
Arri[redacted]		Amica Insurance	

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:48:11 AM	DRAHEICM	CISNERMA	Ownership Changed		Done	1/31/2008 11:48:11 AM	Service Request Ownership has changed FROM: BAGAYASH TO: CISNERMA

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]		Amica Insurance	

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:53 AM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- Phone	Done	1/31/2008 02:48:30 PM	called

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

CRS asked PAR detailed questions

CRS adv: Did insurance pay for repairs?

Cust sts: Yes

CRS adv: So you are looking to subrogate?

Cust sts:

CRS adv: Will forward case to ESIS. They will be in touch within 10 business days

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:46 AM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- Dealer	Done	1/31/2008 01:13:48 PM	called (919) 834-0311

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Regina Britt, Svc Adv

CRS adv: Cust made allegation that steering went out and caused them to get in collision. Any related repairs?

Dlr sts: In 06 there was a steering issue where vehicle was pulling to right

CRS adv: OK Thank you

Dlr sts: Call me if you have any questions because I know this gentlemen kind of well

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:38 AM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- AVM	Done	1/31/2008 01:15:24 PM	called DVM White, Donald

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

DVM White, Donald
Node: 404082
Mailbox: 8182

CRS adv: Customer Name, Vehicle information, Nature of allegation
CRS adv: if you have any additional information pertaining to cust or vehicle please call me @ 866-790-5700 ext 21171

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:32 AM	DRAHEICM	CISNERMA	BRC PAR	Acknowledgement	Done	1/31/2008 01:56:30 PM	called (800) 892-6422 x4-5336

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

left message

CRs adv: Received case in PAR, please call back

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:28 AM	DRAHEICM	CISNERMA	Notify CRM		Done	1/31/2008 12:08:22 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:21 AM	DRAHEICM	CISNERMA	Research		Done	1/31/2008 12:10:45 PM	research vin

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Recalls: No open recalls

History: No related repairs

SRs: No other SRs

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 11:47:06 AM	DRAHEICM	CISNERMA	BRC PAR	Case Assigned	Done	1/31/2008 12:08:18 PM	assigned to matt cisneros ext 21171

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 10:11:27 AM	DRAHEICM	BAGAYASH	SR Opened		Done	1/31/2008 10:11:27 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/31/2008 10:11:24 AM	DRAHEICM	BAGAYASH	SR Closed - Satisfied		Done	1/31/2008 10:11:25 AM	Service Request has been Closed Satisfied.

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/30/2008 01:34:07 PM	BAGAYASH	DRAHEICM	Escalation	Initiate PAR	Done	1/31/2008 10:10:57 AM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

CRS advised that a person from the PAR Department will contact the customer within 2 business days.

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/30/2008 01:30:37 PM	BAGAYASH	BAGAYASH	Inbound Call Customer	Complex Request	Done	1/30/2008 01:33:42 PM	insurance agent returning call

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Cust Sts:
Cust sts she received message from CRS and is returning call.

Cust Sks:
returning call to CRS

CRS Adv:
CRS adv that CRS needs to verify some information in regards the accident.
CRS filled out the Pre Par form.
CRS adv cust that case will be escalated to the product allegations dept and will be contacted by a representative from that dept in 2 business days.
CRS provided SR#.

Wine Summers/RR/Mla/L1

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/30/2008 12:45:28 PM	BAGAYASH	BAGAYASH	Scheduled Outbound Call Cust	Cancelled	Done	1/30/2008 01:34:02 PM	call cust to gather info for par form,8008926422 x 45336

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

CRS will call cust to gather info for par form,8008926422 x 45336.
Jan 31,2008 Thu
2-4pm est

CRS cancelling sched call, cust called back.

Wine Summers/RR/Mla/L1

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/30/2008 12:40:39 PM	BAGAYASH	BAGAYASH	Outbound Call Customer	Left Message	Done	1/30/2008 12:45:27 PM	called cust to gather info for par form,8008926422 x 45336

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

CRS called cust to gather info for par form,8008926422 x 45336.
CRS left message:
CRS adv that this is in regards reimbursement request in line with the product failure, and adv that CRS needs to verify some info.
CRS provided contact#.

Wine Summers/RR/Mla/L1

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/29/2008 05:26:22 PM	BAGAYASH	BAGAYASH	Other		Done	1/29/2008 05:27:08 PM	as per Team Lead adv, case will be escalated for further review

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
1/29/2008 05:25:54 PM	SADMIN	BAGAYASH	Inbound White Mail	Customer	Done	1/29/2008 05:26:21 PM	TREAD - non temp TREAD 07126 Scanned: 2008-01-09-15.26.47.000000, MSXDocNum: 0800901296

Contact Last Name	Contact First Name	Account	BAC Code
		Amica Insurance	

Comments

CRS received docs:
- signed claim form
- letter
- insurance docs
- pictures of veh
- rental veh doc
- proof of payment (copy of check)

Wine Summers/RR/Mia/L1

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M01	No Symptom Indicated	Steering - General

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZG528354[redacted]

VEHICLE INFORMATION

Merchandising Model :	2ZG69 -2005 G6 - 6CYL SEDAN	**Warranty Start Date :**	12/30/2004
BARS Order Type :	70 - RETAIL - STOCK		
Delivering Dealer :	THOMPSON CADILLAC-PONTIAC-GMC PO BOX 18408 RALEIGH , NC 27619-8408 (919) 834-0311	**Selling Source :**	16 - PONTIAC
		Site Code :	04057
		Business Associate Code :	186713

Service Contract :	No	**Branded Title :**	No	**Warranty Block :**	No	**PDI Status :**	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
RC	05005	REAR SEAT CHILD RESTRAINT ANCHORAGE OWNER MANUAL UPDATE	N/A	Closed

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

OnStar Equipped	No	**OnStar Status**	N/A	Refer to Help page for details or:go to OnStar Online Enrollment (located on the "OnStar" tab in GM InfoNET) or (888)ONSTAR1 (888) 667-8271.

XM Equipped	Yes	**XM Radio ID**	5ZQY70WQ	**XM Status**	Inactive	Refer to Help page for details or: www.xmradio.gm.ca or Dealer Hotline 1.877.GET.XMST (1-877-438-9677).

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	12/30/2004	10 miles	12/30/2007	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	12/30/2004	10 miles	12/30/2010	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	12/30/2004	10 miles	12/30/2012	80010 miles
36/36000 FEDERAL EMISSION	12/30/2004	10 miles	12/30/2007	36010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
05/17/2006	318978	#	Z2122 - SPRING CAR CARE PROGRAM	22965 miles
10/27/2004	A29888	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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CK # 208127 75
11-14-07 JB

16 326.55

EXHIBIT C

DIRECTION TO PAY

Date: 11-12-07 Claim Number: L09200703131D

Customer Name: [redacted]

Address: [redacted]

City: Knightdale State NC Zip [redacted]

Home Phone: [redacted] Business Phone: _____

Final Estimate Amt.: $ 4519.92

Deductible: (if applicable) $ 500

Net Amount to Shop: $ 3929.24

Year	Make	Model	Vin Number
2005	Pontiac	G6	1G2ZG528354 [redacted]

I, [redacted], am completely satisfied with the
(Print the Authorized Owners Name)
Workmanship of all repairs and authorizes payment on my claim as listed above to:

Shop Name	Shop Address
True 2 Form	2821 Capital Blvd., Raleigh

Authorized Owners Signature	Date:
[redacted]	11-13-07
Witness Signature [redacted]	Print Name [redacted]

Amica Mutual Insurance Company and Repair Assistance Program authorized repair facility guarantees the workmanship of the repairs for as long as you own the vehicle. If for any reason, you are not fully satisfied with the workmanship of the authorized repairs and we determine that the repairs did not meet the I-CAR standards we will assure the repairs are properly corrected. Simply contact the Amica Mutual Insurance Company claim office nearest you to report the problem.

This guarantee is exclusive of any wear, tear, deterioration, or mechanical breakdown. The guarantee extends only to repairs authorized by Amica Mutual Insurance Company and does not cover prior repairs or subsequent unrelated damage. This guarantee is not transferable.

Fax: Ede. 381-3243

This document contains confidential and proprietary information of Amica Mutual Insurance Company and may not be disclosed to third parties or duplicated without the prior written consent of Amica Mutual Insurance Company

CL#2090155
11-15-07 JB $511.07

Estimate #5832852 Print Toggle Pictures

True2Form Collision - Raleigh, NC

ESTIMATE OF RECORD

Insured/Owner Information

Insured	[redacted]
Owner	
Address Line 1	
Address Line 2	
City	KNIGHTDALE
State Zip	NC 27545
Phone1	[redacted]
Phone2	
Fax	
Email	

Insurance Company Information

Company Type ID	
Company Number	
Company Name	[redacted]
Address Line 1	Suite [redacted]
Address Line 2	
City	Raleigh
State Zip	NC [redacted]
Phone	[redacted]
Fax	
Company Email	
Contact Name	
Contact Title	
Contact Phone	
Contact Email	

Adjuster Information

Name	Judy Brown
Company	Amica - Raleigh Regional
Address Line 1	3201 Beechleaf Court
Address Line 2	Suite 300
City	Raleigh
State Zip	NC 27604
Work Phone	800-892-6422 x45336
Fax	
Email	JBROWN3@AMICA.COM

Inspection Location Information

Inspection Location	Other
Address Line 1	100 Towne Villiage Rd
Address Line 2	
City	Carey
State Zip	NC 27513
Phone1	
Phone2	
Fax	
Contact Name	
Contact Email	

Appraiser Information

Written By	GEORGE PERRY
Company ID Code	
Company Name	True2Form Collision - Raleigh, NC
Address Line 1	2821 Capital Blvd.
Address Line 2	
City	Raleigh
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Email	capitalblvd@true2form.com
License No	
File No	

Repair Facility Information

Facility ID Code	
Facility	TRUE 2 FORM - CAPITAL BLVD
Address Line 1	CAPITAL LOCATION
Address Line 2	2821 CAPITAL BLVD.
City	RALEIGH
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Fed Tax ID	341910878
License No	
Bar No	
Contact Name	
Contact Email	

Claim Information

Claim No	L09200703131D
Claimant No	1
Policy No	[redacted]
Loss Type	Collision
Deductible	$500.00

Estimate Information

Estimating Platform	CCC Pathways
Est Sw Version	4.40.02
Est Sw Unique File ID	CC02JRV3
Est Sw Supplement No	S01
Est Sw Transation Type	S
Est Sw Committed Status	Committed
PC Supplement No	256

Calendar of Events

Loss Date	10/19/2007
Assignment	10/22/2007
Inspection	10/19/2007
Est Sw Created	11/15/2007
PC Created	11/15/2007 7:26:06 AM

Miscellaneous

Notes
Comments

Vehicle Information

Database Code	DR1FQ05	Model	G6	Paint Tone	1
License Plate No	NZA2648	Type	PC	Paint Stage	2
License Plate State	NC	Body Style	4D SED	Paint Code 1	
VIN	1G2ZG5283S[redacted]	Trim Code		Paint Code 2	
Condition		Trim Color		Paint Code 3	
Production Date	10/2004	Molding Code		Primary Point of Impact	Left Front Corner
Year	2005	Engine	6-3.5L-FI	Secondary Points of Impact	
Make Code	PONT	Mileage	56496		
Make Description		Color	Silver		

Equipment Options

Automatic Transmission, Overdrive, Bucket Seats, Cloth Seats, Reclining Seats, Power Steering, Tilt Wheel, Power Brakes, 4 Wheel Disc Brakes, Rear Defogger, Power Windows, Full Wheel Covers, AM Radio, FM Radio, Stereo, Search/Seek, CD Player, Power Locks, Power Trunk/Tailgate, Air Conditioning, Cruise Control, Driver Air Bag, Passenger Air Bag, Console/Storage, Digital Clock, Intermittent Wipers, Power Mirrors, Dual Mirrors, Body Side Moldings, Fog Lamps, Keyless Entry, Clear Coat Paint

Line Items

Line #	Ver	Operation	Part Type	Description	OEM/Vendor Part Number	Qty	Price	Ext	Part Adj %	Part Adj Amt	Labor Units	Labor Type	System Notes
1				FRONT BUMPER									
2	E	Remove/Install		R&I bumper cover	19120467						1.6	Body	
3	E	Repair		Bumper cover	19120467						2.0	Body	
3	E	Repair		Bumper cover							2.8	Refinish	
4	E			Add for Clear Coat							1.1	Refinish	
5	S1	R&R	OEM	Emblem	25771372	1	33.38 T	33.38			0.2	Body	
6	E	Remove/Install		RT Lower grille	15243287						0.2	Body	
7	E	Remove/Install		LT Lower grille	15243286						0.2	Body	
8				GRILLE									
9	E	Remove/Install		RT Grille	22699328						0.2	Body	
10	E	Remove/Install		LT Grille	22699329								
11				FRONT LAMPS									
12	E	Remove/Install		RT Fog lamp assy	15162675						0.3	Body	
13	E	Remove/Install		LT Fog lamp assy	15162675						0.3	Body	
14	E	Remove/Install		LT Headlamp assy	15835750								
15				RADIATOR SUPPORT									
16	S1	R&R	OEM	LT Side shield 3.5 & 3.9 liter coupe & s	15809317	1	18.29 T	18.29			0.3	Body	
17				HOOD									
18	E	Blend		Hood	15801208						1.4	Refinish	
19	S1	Remove/Install		Insulator	15890356						0.3	Body	
20	S1	R&R	OEM	Insulator retainer	22718305	8	1.69 T	13.52					
21				WINDSHIELD									
22	S1	Sublet	None OEM Glass (Nags)	Windshield NAGS +10%	DW01603	1	300.00	300.00	10.00 %	30.00			
23	S1	R&R	OEM	RT Wiper arm	15797483	1	38.63 T	38.63			0.2	Body	
24	S1	R&R	OEM	RT Wiper blade	15779415	1	29.00 T	29.00			0.1	Body	
25	S1	R&R	OEM	RT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
26	S1	R&R	OEM	LT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
27				FENDER									
28	E	R&R	OEM	LT Fender	15292019	1	169.30 T	169.30			2.0	Body	
28	E	R&R		LT Fender							1.8	Refinish	
29	E			Add for Clear Coat							0.7	Refinish	
30	E			Add for Edging							0.5	Refinish	
31	E			Deduct for Overlap							-0.3	Body	
32	E	R&R	OEM	LT Fender liner	15255732	1	34.73 T	34.73					
33	E	R&R	OEM	LT Fender liner retainer	10121502	6	0.33 T	1.98					
34	E	Repair		LT Rear panel	15780004						3.0	Body	
34	E	Repair		LT Rear panel							0.5	Refinish	
35				WHEELS									
36	E	R&R	Re-Chrome	RECOND LT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
37	E	R&R	Re-Chrome	RECOND RT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
38	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
39	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
40	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
41	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
42	E	Sublet	Sublet	4 WHEEL ALIGNMENT		1	69.95	69.95					

43	S1	R&R	Other	L/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95				
44	S1	R&R	Other	R/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95				
45	S1	Sublet	Sublet	Scrap tire fee		1	4.00		4.00				
46	S1	Sublet	Sublet	Tire recycling fee		1	3.50		3.50				
47	S1	R&R	Aftermarket	A/M Wheel nut alloy wheel		2	3.25	T	6.50				
48				FRONT SUSPENSION									
49	E			O/H frt susp lt							3.0	Body	
50	S1	R&R	OEM	LT Hub & bearing	15793213	1	281.93	T	281.93				
51	E	Repair		Deduct O/H frt susp							-3.0	Body	
52	E	R&R	OEM	LT Brake hose	22729634	1	22.67	T	22.67				
53	E	Sublet		Bleed brake system									
54	S1	R&R	Other	Brake fluid		1	4.50	T	4.50				
55	S1	R&R	OEM	LT Knuckle	21995733	1	172.66	T	172.66				
56	S1	R&R	OEM	LT Lower cntrl arm	22730775	1	187.93	T	187.93				
57	E			Deduct for Overlap									
58	S1	R&R	OEM	LT Strut w/ride & handling suspension	88964544	1	120.22	T	120.22				
59	E			Deduct for Overlap									
60	S1	R&R	OEM	LT Stabilizer link	22670300	1	43.12	T	43.12				
61	E			Deduct for Overlap									
62	S1	R&R	OEM	LT Axle assy	10379129	1	248.10	T	248.10				
63	E			Deduct for Overlap							-0.5	Body	
64	E	Repair		Add back labor deduction							0.5	Body	
65	S1	Sublet	Sublet	Labor to install frt suspension componen		1	396.20		396.20				
66				PILLARS, ROCKER & FLOOR									
67	S1	R&R	OEM	LT Rocker molding	15209853	1	109.54	T	109.54		0.5	Body	
68				FRONT DOOR									
69	E	Repair		LT Outer panel (front edge)	15146085						0.5	Body	
69	E	Repair		LT Outer panel (front edge)							2.0	Refinish	
70	E			Overlap Major Adj. Panel							-0.4	Refinish	
71	E			Add for Clear Coat							0.3	Refinish	
72	E	Remove/Install		LT Belt molding	15889536						0.2	Body	
73	E	Blend		LT Body side mldg	89024127						0.2	Refinish	
74	E	Remove/Install		LT Mirror assy	15278129						0.3	Body	
75	E	Remove/Install		LT Handle, outside	22672194						0.4	Body	
76	E	Remove/Install		LT R&I trim panel	15806821						0.4	Body	
77	E	Sublet	Sublet	Towing		1	80.00		80.00				
78	E	Sublet	Sublet	Tow to Atlantic Avenue Tire for sublet r		1	45.00		45.00				
79	E	R&R	Other	CORROSION PROTECTION		1	10.00		10.00		0.5	Body	
80	E	Refinish		TINT COLOR TO BLENDABLE MATCH							0.5	Refinish	
81	E		Other	COVER CAR TO PAINT		1	5.00		5.00				
82	E		Other	HAZARDOUS WASTE REMOVAL		1	5.00		5.00				
83	S1			FINAL BILL PLEASE PAY SHOP DIRECTLY									

Summary

	Type	Supp	Units / Amt	Rate	Other	Misc	Base	Markup	Discount	Gross	Tax Rate	Totals
Parts												

	OEM		-	-	-	-	1557.52	0.00	0.00	1557.52	6.7500%	
	Aftermarket		-	-	-	-	6.50	0.00	0.00	6.50	6.7500%	
	Re-Chrome		-	-	-	-	349.98	0.00	0.00	349.98	6.7500%	
	Other		-	-	-	-	200.30	0.00	0.00	200.30	6.7500%	
	None OEM Glass (Nags)		-	-	-	-	300.00	30.00	0.00	330.00		
	Total Parts		-	-	-	-	2414.30	30.00	0.00	2444.30	-	2444.30
Labor												
	Body	E01	13.40	40.00		-	536.00	0.00	0.00	536.00		
	Body	S01	1.00	40.00		-	40.00	0.00	0.00	40.00		
	Refinish	E01	11.40	40.00		-	456.00	0.00	0.00	456.00		
	Total Labor		-	-		-	1032.00	0.00	0.00	1032.00	-	1032.00
Material												
	Paint		11.40	24.00	262.20	999.00	273.60	-	-	273.60		
	Total Material		-	-	262.20	-	273.60	0.00	0.00	273.60	-	273.60
Sublet												
	Sublet		-	-	-	-	628.65	0.00	0.00	628.65		
	Total Sublet		-	-	-	-	628.65	0.00	0.00	628.65	-	628.65
Other Charges												
	Total Other Charges		-	-	-	-		0.00	0.00		-	0.00
Taxes												
	Sales Tax		2094.30	6.7500%	-	-	141.37	-	-	141.37	-	
	Total Taxes		-	-	-	-	141.37	0.00	0.00	141.37	-	141.37
Estimate Totals												
												[illegible]
	Previous Total											4008.85
	Current Supplement											511.07
Customer Pay												
	Deductible									500.00	-	
	Related Prior Damage										-	
	Appearance Allowance										-	
	Betterment										-	
												-
Insurance Pay												

Charges At-A-Glance

Estimate has no charges.

Vendor Info

Estimate has no relevant vendor information.

This estimate has been prepared based on the use of automobile parts not made by the original manufacturer. Parts used in the repair of your vehicle by other than the original manufacturer are required to be at least equal in like kind and quality in terms of fit, quality, and performance to the original manufacturer parts they are replacing. In the repair of your covered auto under the physical damage coverage provisions of this policy, we may require or specify the use of automobile parts not made by the original manufacturer. There parts are required to be at least equal in terms of fit, quality, and performance to the original manufacturer parts they replace.

ARMS AMICA INS

Rental Company: ENTERPRISE RENT-A-CAR
Invoice: D206563-53J6

Bill To:
AMICA INS
ATTN: JUDY BROWN
3201 BEECHLEAF CT SUITE 300
RALEIGH , NC 27604

Renter: [redacted]

Rental Branch Location:
ENTERPRISE RENT-A-CAR (53J6)
7519 US HIGHWAY 64 E
KNIGHTDALE, NC 275459274
(919) 217-9444

Billing Detail:

Rental Period: 10/19/07 to 11/13/07 (26 days)
Billed Period: 10/19/07 to 11/13/07 (26 days)

Description	Rate:	Amount:
26 DAYS @	$23.99	$623.74
26 VLF	$0.39	$10.14
1 SURCHARGE%	%8.00	$50.71
1 HU TAX	%8.00	$50.71
TOTAL CHARGES:		$735.30
Less Amount Received:		$0.00
AMOUNT DUE.....		$735.30

ADDITIONAL CLAIM INFORMATION:

Claim Number : [redacted]
Claim Type: Insured
Vehicle Condition: Non-Driveable
Date Of Loss: 10/19/07
Insured Name: [redacted]
Owner's Vehicle: 2005 PONTIAC G6
Additional Driver:

Repair Facility:
TRUE2FORM-CAPITAL BLVD (#501)
RALEIGH,, NC 27604
(919) 872-2213

Effective Date and Time	Year	Make	Model	VIN	Mil
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366

Rental Invoice

Please Return This Portion with Remittance

Make Payment To:
ENTERPRISE RENT-A-CAR (53EE)
2860 SLATER RD
MORRISVILLE,, NC 275608436
Federal ID:43-1241935

Total Charges: $735.30
Less Amount Received: $0.00
Total Amount Due..... $735.30

Please include on your check:
Invoice: D206563-53J6

11/15

07126

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 1/3/08

17-Digit Vehicle Identification Number (VIN): 1G2ZG5285354 [redacted]

Mileage at Time of Repair: 56496 Date of Repair: 10/24/07

Claimant Name (please print): [redacted]

Street Address or PO Box Number: [redacted]

City: Knightdale State: NC ZIP Code: [redacted]

Daytime Telephone Number (include Area Code): [redacted]

Evening Telephone Number (include Area Code): [redacted]

Amount of Reimbursement Requested: $ 5,255.22

The following documentation must accompany this claim form.

Original or clear copy of all receipts, invoices, and/or repair orders that show:

- The name and address of the person who paid for the repair.
- The Vehicle Identification Number (VIN) of the vehicle that was repaired.
- What problem occurred, what repair was done, when it was done, and who did it.
- The total cost of the repair expense that is being claimed.
- Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)

My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.

Claimant's Signature: Judy Brown - Amica Insurance on behalf of [redacted]

Please mail this claim form and the required do[redacted]

Reimbursement Department
P.O. Box 33170
Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number:
1-800-204-0261

Amica
AUTO HOME LIFE

RALEIGH REGIONAL OFFICE
4800 Falls of Neuse Road, Suite 320
Raleigh, North Carolina 27609-8140

Toll-free: 1-800-89-Amica (1-800-892-6422)
Claims Fax: 1-866-381-3243
Sales/Service Fax: 1-919-790-5483

100th ANNIVERSARY

January 5, 2008

General Motors
Attn: Reimbursement Department
PO Box 33170
Detroit, MI 48232-5170

Our File Number: L09200703131D
Our Insured: [redacted]
Your Customer: [redacted]
Vehicle: 2005 Pontiac G6
VIN: 1G2ZG528354[redacted]
Date of Loss: October 19, 2007
Amount of Loss: $5255.22

To whom it may concern:

We are subrogated to the rights of our insured due to the payment of a collision loss.

Our insured has presented us with paperwork indicating there is an existing problem with the steering in the 2005 Pontiac G6. In view of this, our insured reported that he was in the process of turning when the sterring locked and he was unable to maneuver and he ran into a curb causing substantial damage to his vehicle.

The amount of damage to our insured's vehicle is shown above. This amount includes both our loss and our insured's deductible.

Enclosed are copies of our supporting papers.

Your prompt action regarding payment would be appreciated.

Very truly yours,

Judy D. Brown, AIC
Claims Department, Ext.45336
Amica Mutual Insurance Company
jbrown3@amica.com

*JB

SUBROGATION PAYMENT OUTLINE

Repair Figure	$	3508.85
Deductible	$	500.00
Supplement #1	$	511.07
Rental Expense	$	735.30
TOTAL AMOUNT	**$**	**5255.22**

CK# 2089275
11-14-07 JB
$3508.85

EXHIBIT C

DIRECTION TO PAY

Date: 11-12-07 Claim Number: [redacted]

Customer Name: [redacted]

Address: [redacted]

City: Knightdale State NC Zip [redacted]

Home Phone: [redacted] Business Phone: _____

Final Estimate Amt.: $ 4519.92

Deductible: (if applicable) $ 500

Net Amount to Shop: $ 3929.24

Year	Make	Model	Vin Number
2005	Pontiac	G6	1G2ZG528354 [redacted]

I, [redacted], am completely satisfied with the
(Print the Authorized Owners Name)
Workmanship of all repairs and authorizes payment on my claim as listed above to:

Shop Name	Shop Address
True 2 Form	2821 Capital Blvd., Raleigh

Authorized Owners Signature:	Date:
[redacted]	11-13-07
[redacted]	Print Name [redacted]

Amica Mutual Insurance Company and Repair Assistance Program authorized repair facility guarantees the workmanship of the repairs for as long as you own the vehicle. If for any reason, you are not fully satisfied with the workmanship of the authorized repairs and we determine that the repairs did not meet the I-CAR standards, we will assure the repairs are properly corrected. Simply contact the Amica Mutual Insurance Company claim office nearest you to report the problem.

This guarantee is exclusive of any wear, tear, deterioration, or mechanical breakdown. The guarantee extends only to repairs authorized by Amica Mutual Insurance Company and does not cover prior repairs or subsequent unrelated damage. This guarantee is not transferable.

Fax: Ude. 381-3243

This document contains confidential and proprietary information of Amica Mutual Insurance Company and may not be disclosed to third parties or duplicated without the prior written consent of Amica Mutual Insurance Company

Estimate

[Judy D. Brown - Raleigh Claims]

CK#2090155
11-15-07 OB $511.07

Estimate #5832852 **Print** **Toggle Pictures**

True2Form Collision - Raleigh, NC

ESTIMATE OF RECORD

Insured/Owner Information

Insured	[redacted]
Owner	
Address Line 1	
Address Line 2	
City	KNIGHTDALE
State Zip	NC [redacted]
Phone1	
Phone2	
Fax	
Email	

Insurance Company Information

Company Type ID	
Company Number	
Company Name	Amica - Raleigh Regional
Address Line 1	4800 Falls of Neuse Road, Suite 320
Address Line 2	
City	Raleigh
State Zip	NC 27604-1547
Phone	(800) 892-6422
Fax	(866) 381-3243
Company Email	
Contact Name	
Contact Title	
Contact Phone	
Contact Email	

Adjuster Information

Name	Judy Brown
Company	Amica - Raleigh Regional
Address Line 1	3201 Beechleaf Court
Address Line 2	Suite 300
City	Raleigh
State Zip	NC 27604
Work Phone	800-892-6422 x45336
Fax	
Email	JBROWN3@AMICA.COM

Inspection Location Information

Inspection Location	Other
Address Line 1	100 Towne Villiage Rd
Address Line 2	
City	Carey
State Zip	NC 27513
Phone1	
Phone2	
Fax	
Contact Name	
Contact Email	

Appraiser Information

Written By	GEORGE PERRY
Company ID Code	
Company Name	True2Form Collision - Raleigh, NC
Address Line 1	2821 Capital Blvd.
Address Line 2	
City	Raleigh
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Email	capitalblvd@true2form.com
License No	
File No	

Repair Facility Information

Facility ID Code	
Facility	TRUE 2 FORM - CAPITAL BLVD
Address Line 1	CAPITAL LOCATION
Address Line 2	2821 CAPITAL BLVD.
City	RALEIGH
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Fed Tax ID	341910878
License No	
Bar No	
Contact Name	
Contact Email	

Claim Information

Claim No	[redacted]
Claimant No	1
Policy No	9804321091
Loss Type	Collision
Deductible	$500.00

Estimate Information

Estimating Platform	CCC Pathways
Est Sw Version	4.40.02
Est Sw Unique File ID	CC02JRV3
Est Sw Supplement No	S01
Est Sw Transation Type	S
Est Sw Committed Status	Committed
PC Supplement No	256

Calendar of Events

Loss Date	10/19/2007
Assignment	10/22/2007
Inspection	10/19/2007
Est Sw Created	11/15/2007
PC Created	11/15/2007 7:26:06 AM

Miscellaneous

Notes

Comments

Vehicle Information

Database Code	DR1FQ05
License Plate No	NZA2648
License Plate State	NC
VIN	1G2ZG52835[redacted]
Condition	
Production Date	10/2004
Year	2005
Make Code	PONT
Make Description	

Model	G6
Type	PC
Body Style	4D SED
Trim Code	
Trim Color	
Molding Code	
Engine	6-3.5L-FI
Mileage	56496
Color	Silver

Paint Tone	1
Paint Stage	2
Paint Code 1	
Paint Code 2	
Paint Code 3	
Primary Point of Impact	Left Front Corner
Secondary Points of Impact	

Equipment Options

Automatic Transmission, Overdrive, Bucket Seats, Cloth Seats, Reclining Seats, Power Steering, Tilt Wheel, Power Brakes, 4 Wheel Disc Brakes, Rear Defogger, Power Windows, Full Wheel Covers, AM Radio, FM Radio, Stereo, Search/Seek, CD Player, Power Locks, Power Trunk/Tailgate, Air Conditioning, Cruise Control, Driver Air Bag, Passenger Air Bag, Console/Storage, Digital Clock, Intermittent Wipers, Power Mirrors, Dual Mirrors, Body Side Moldings, Fog Lamps, Keyless Entry, Clear Coat Paint

Line Items

Line #	Ver	Operation	Part Type	Description	OEM/Vendor Part Number	Qty	Price	Ext	Part Adj %	Part Adj Amt	Labor Units	Labor Type	System Notes
1				FRONT BUMPER									
2	E	Remove/Install		R&I bumper cover	19120467						1.6	Body	
3	E	Repair		Bumper cover	19120467						2.0	Body	
3	E	Repair		Bumper cover							2.8	Refinish	
4	E			Add for Clear Coat							1.1	Refinish	
5	S1	R&R	OEM	Emblem	25771372	1	33.38 T	33.38			0.2	Body	
6	E	Remove/Install		RT Lower grille	15243287						0.2	Body	
7	E	Remove/Install		LT Lower grille	15243286						0.2	Body	
8				GRILLE									
9	E	Remove/Install		RT Grille	22699328						0.2	Body	
10	E	Remove/Install		LT Grille	22699329								
11				FRONT LAMPS									
12	E	Remove/Install		RT Fog lamp assy	15162675						0.3	Body	
13	E	Remove/Install		LT Fog lamp assy	15162675						0.3	Body	
14	E	Remove/Install		LT Headlamp assy	15835750								
15				RADIATOR SUPPORT									
16	S1	R&R	OEM	LT Side shield 3.5 & 3.9 liter coupe & s	15809317	1	18.29 T	18.29			0.3	Body	
17				HOOD									
18	E	Blend		Hood	15801208						1.4	Refinish	
19	S1	Remove/Install		Insulator	15890356						0.3	Body	
20	S1	R&R	OEM	Insulator retainer	22718305	8	1.69 T	13.52					
21				WINDSHIELD									
22	S1	Sublet	None OEM Glass (Nags)	Windshield NAGS +10%	DW01603	1	300.00	300.00	10.00 %	30.00			
23	S1	R&R	OEM	RT Wiper arm	15797483	1	38.63 T	38.63			0.2	Body	
24	S1	R&R	OEM	RT Wiper blade	15779415	1	29.00 T	29.00			0.1	Body	
25	S1	R&R	OEM	RT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
26	S1	R&R	OEM	LT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
27				FENDER									
28	E	R&R	OEM	LT Fender	15292019	1	169.30 T	169.30			2.0	Body	
28	E	R&R		LT Fender							1.8	Refinish	
29	E			Add for Clear Coat							0.7	Refinish	
30	E			Add for Edging							0.5	Refinish	
31	E			Deduct for Overlap							-0.3	Body	
32	E	R&R	OEM	LT Fender liner	15255732	1	34.73 T	34.73					
33	E	R&R	OEM	LT Fender liner retainer	10121502	6	0.33 T	1.98					
34	E	Repair		LT Rear panel	15780004						3.0	Body	
34	E	Repair		LT Rear panel							0.5	Refinish	
35				WHEELS									
36	E	R&R	Re-Chrome	RECOND LT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
37	E	R&R	Re-Chrome	RECOND RT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
38	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
39	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
40	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
41	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
42	E	Sublet	Sublet	4 WHEEL ALIGNMENT		1	69.95	69.95					

Estimate

[Judy D. Brown - Raleigh Claims]

43	S1	R&R	Other	L/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95			
44	S1	R&R	Other	R/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95			
45	S1	Sublet	Sublet	Scrap tire fee		1	4.00		4.00			
46	S1	Sublet	Sublet	Tire recycling fee		1	3.50		3.50			
47	S1	R&R	Aftermarket	A/M Wheel nut alloy wheel		2	3.25	T	6.50			
48				FRONT SUSPENSION								
49	E			O/H frt susp it						3.0	Body	
50	S1	R&R	OEM	LT Hub & bearing	15793213	1	281.93	T	281.93			
51	E	Repair		Deduct O/H frt susp						-3.0	Body	
52	E	R&R	OEM	LT Brake hose	22729634	1	22.67	T	22.67			
53	E	Sublet		Bleed brake system								
54	S1	R&R	Other	Brake fluid		1	4.50	T	4.50			
55	S1	R&R	OEM	LT Knuckle	21995733	1	172.66	T	172.66			
56	S1	R&R	OEM	LT Lower cntrl arm	22730775	1	187.93	T	187.93			
57	E			Deduct for Overlap								
58	S1	R&R	OEM	LT Strut w/ride & handling suspension	88964544	1	120.22	T	120.22			
59	E			Deduct for Overlap								
60	S1	R&R	OEM	LT Stabilizer link	22670300	1	43.12	T	43.12			
61	E			Deduct for Overlap								
62	S1	R&R	OEM	LT Axle assy	10379129	1	248.10	T	248.10			
63	E			Deduct for Overlap						-0.5	Body	
64	E	Repair		Add back labor deduction						0.5	Body	
65	S1	Sublet	Sublet	Labor to Install frt suspension componen		1	396.20		396.20			
66				PILLARS, ROCKER & FLOOR								
67	S1	R&R	OEM	LT Rocker molding	15209853	1	109.54	T	109.54	0.5	Body	
68				FRONT DOOR								
69	E	Repair		LT Outer panel (front edge)	15146085					0.5	Body	
69	E	Repair		LT Outer panel (front edge)						2.0	Refinish	
70	E			Overlap Major Adj. Panel						-0.4	Refinish	
71	E			Add for Clear Coat						0.3	Refinish	
72	E	Remove/Install		LT Belt molding	15889536					0.2	Body	
73	E	Blend		LT Body side mldg	89024127					0.2	Refinish	
74	E	Remove/Install		LT Mirror assy	15278129					0.3	Body	
75	E	Remove/Install		LT Handle, outside	22672194					0.4	Body	
76	E	Remove/Install		LT R&I trim panel	15806821					0.4	Body	
77	E	Sublet	Sublet	Towing		1	80.00		80.00			
78	E	Sublet	Sublet	Tow to Atlantic Avenue Tire for sublet r		1	45.00		45.00			
79	E	R&R	Other	CORROSION PROTECTION		1	10.00		10.00	0.5	Body	
80	E	Refinish		TINT COLOR TO BLENDABLE MATCH						0.5	Refinish	
81	E		Other	COVER CAR TO PAINT		1	5.00		5.00			
82	E		Other	HAZARDOUS WASTE REMOVAL		1	5.00		5.00			
83	S1			FINAL BILL PLEASE PAY SHOP DIRECTLY								

Summary

	Type	Supp	Units / Amt	Rate	Other	Misc	Base	Markup	Discount	Gross	Tax Rate	Totals
Parts												

	OEM		-	-	-	-	1557.52	0.00	0.00	1557.52	6.7500%	
	Aftermarket		-	-	-	-	6.50	0.00	0.00	6.50	6.7500%	
	Re-Chrome		-	-	-	-	349.98	0.00	0.00	349.98	6.7500%	
	Other		-	-	-	-	200.30	0.00	0.00	200.30	6.7500%	
	None OEM											
	Glass (Nags)		-	-	-	-	300.00	30.00	0.00	330.00		
	Total Parts		-	-	-	-	**2414.30**	**30.00**	**0.00**	**2444.30**	-	**2444.30**
Labor												
	Body	E01	13.40	40.00		-	536.00	0.00	0.00	536.00		
	Body	S01	1.00	40.00		-	40.00	0.00	0.00	40.00		
	Refinish	E01	11.40	40.00		-	456.00	0.00	0.00	456.00		
	Total Labor		-	-		-	**1032.00**	**0.00**	**0.00**	**1032.00**	-	**1032.00**
Material												
	Paint		11.40	24.00	262.20	999.00	273.60	-	-	273.60		
	Total Material		-	-	**262.20**	-	**273.60**	**0.00**	**0.00**	**273.60**	-	**273.60**
Sublet												
	Sublet		-	-	-	-	628.65	0.00	0.00	628.65		
	Total Sublet		-	-	-	-	**628.65**	**0.00**	**0.00**	**628.65**	-	**628.65**
Other Charges												
	Total Other Charges		-	-	-	-		**0.00**	**0.00**		-	**0.00**
Taxes												
	Sales Tax		2094.30	6.7500%	-	-	141.37	-	-	141.37	-	
	Total Taxes		-	-	-	-	**141.37**	**0.00**	**0.00**	**141.37**	-	**141.37**
Estimate Totals												
	Estimate Total											**4519.92**
	Previous Total											4008.85
	Current Supplement											511.07
Customer Pay												
	Deductible									500.00	-	
	Related Prior Damage										-	
	Appearance Allowance										-	
	Betterment										-	
	Customer Total											**500.00**
Insurance Pay												
	Insurance Pay											**4019.92**

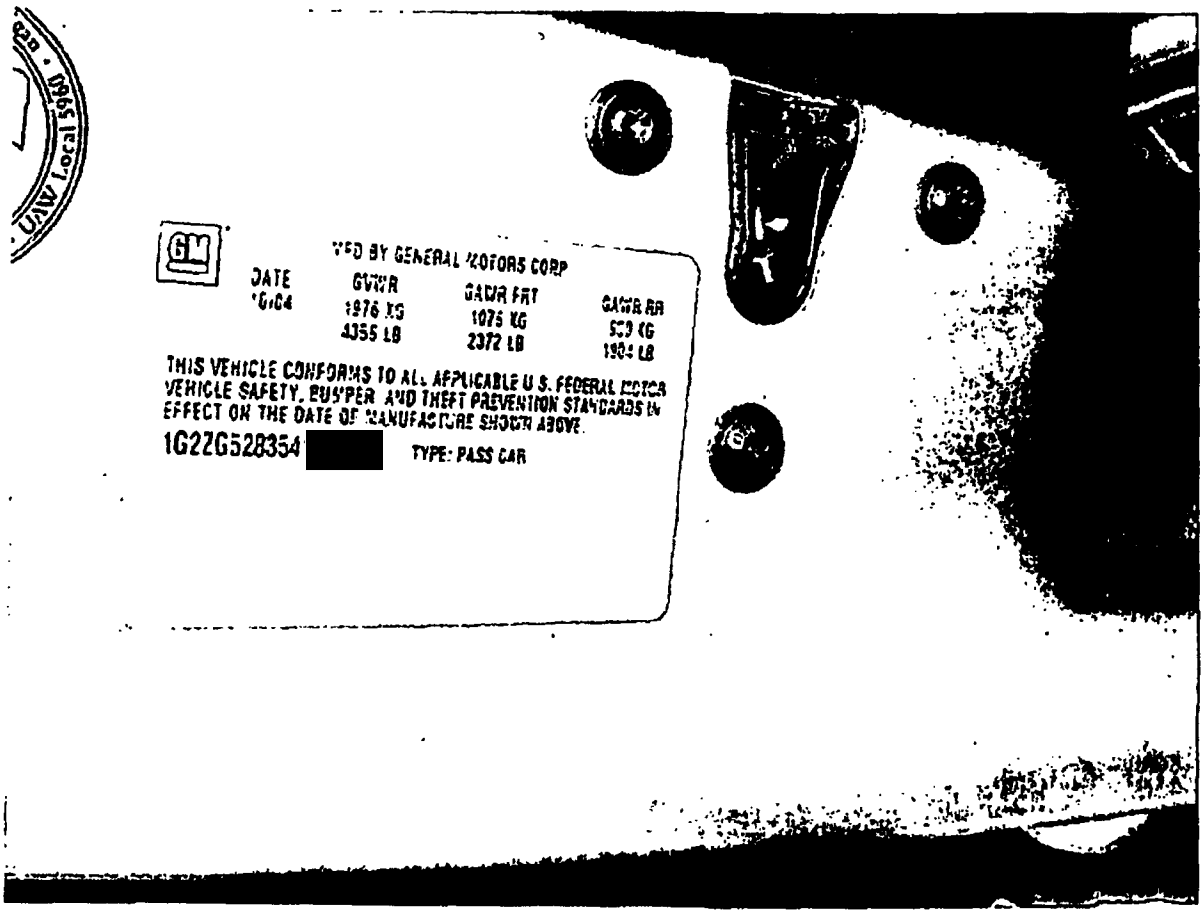
Charges At-A-Glance

Estimate has no charges.

Vendor Info

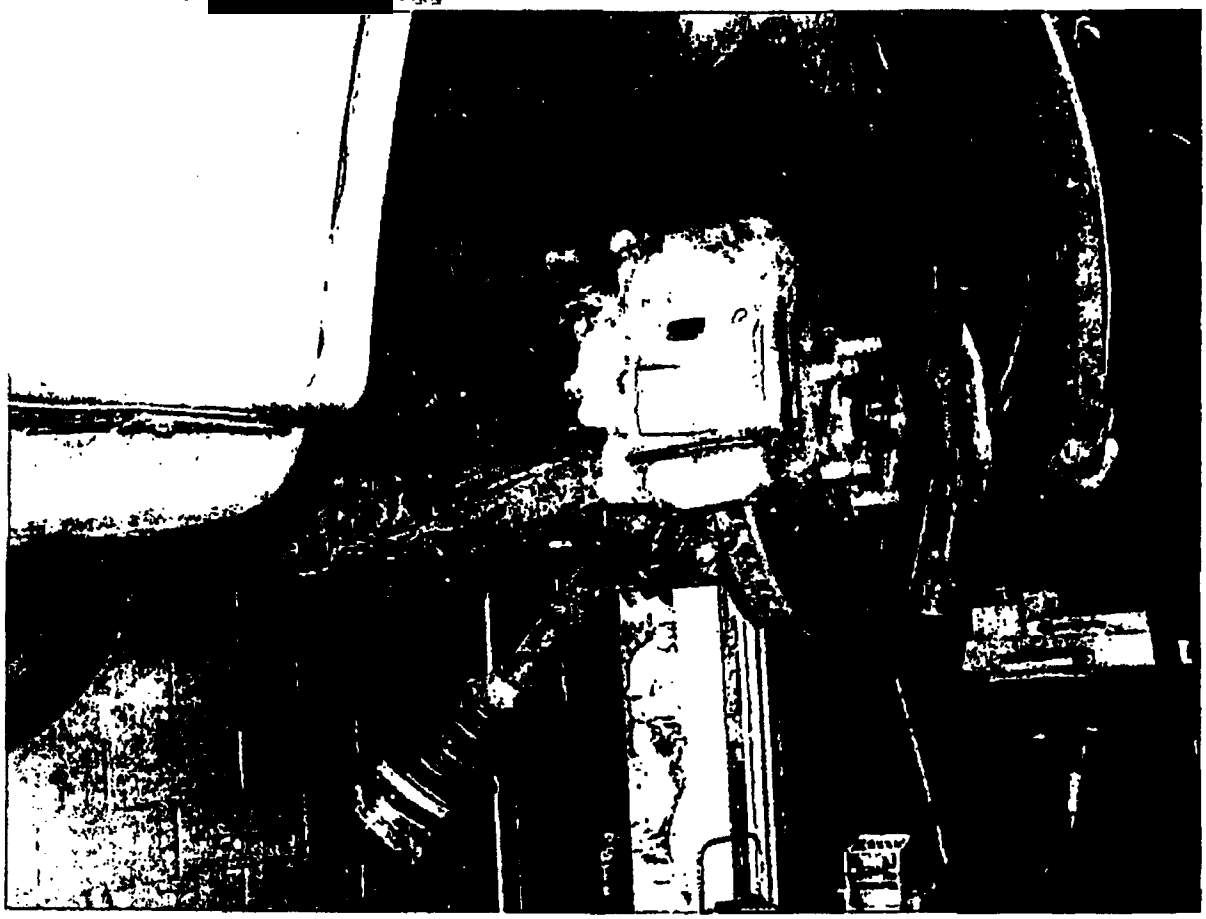
Estimate has no relevant vendor information.

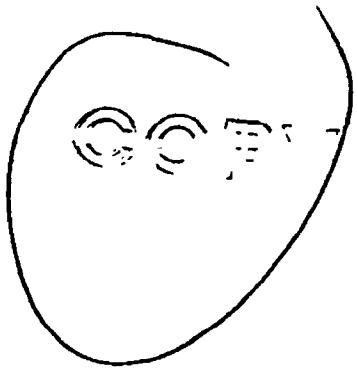
This estimate has been prepared based on the use of automobile parts not made by the original manufacturer. Parts used in the repair of your vehicle by other than the original manufacturer are required to be at least equal in like kind and quality in terms of fit, quality, and performance to the original manufacturer parts they are replacing. In the repair of your covered auto under the physical damage coverage provisions of this policy, we may require or specify the use of automobile parts not made by the original manufacturer. There parts are required to be at least equal in terms of fit, quality, and performance to the original manufacturer parts they replace.


UAW Local 595
TED BY GENERAL MOTORS CORP
DATE
GVWR
GAWR FRT
GAWR RR
1976 KG
1075 KG
4355 LB
2372 LB
THIS VEHICLE CONFORMS TO ALL APPLICABLE U.S. FEDERAL MOTOR VEHICLE SAFETY, BUMPER AND THEFT PREVENTION STANDARDS IN EFFECT ON THE DATE OF MANUFACTURE SHOWN ABOVE.
1G2ZG528354
TYPE: PASS CAR

COPY

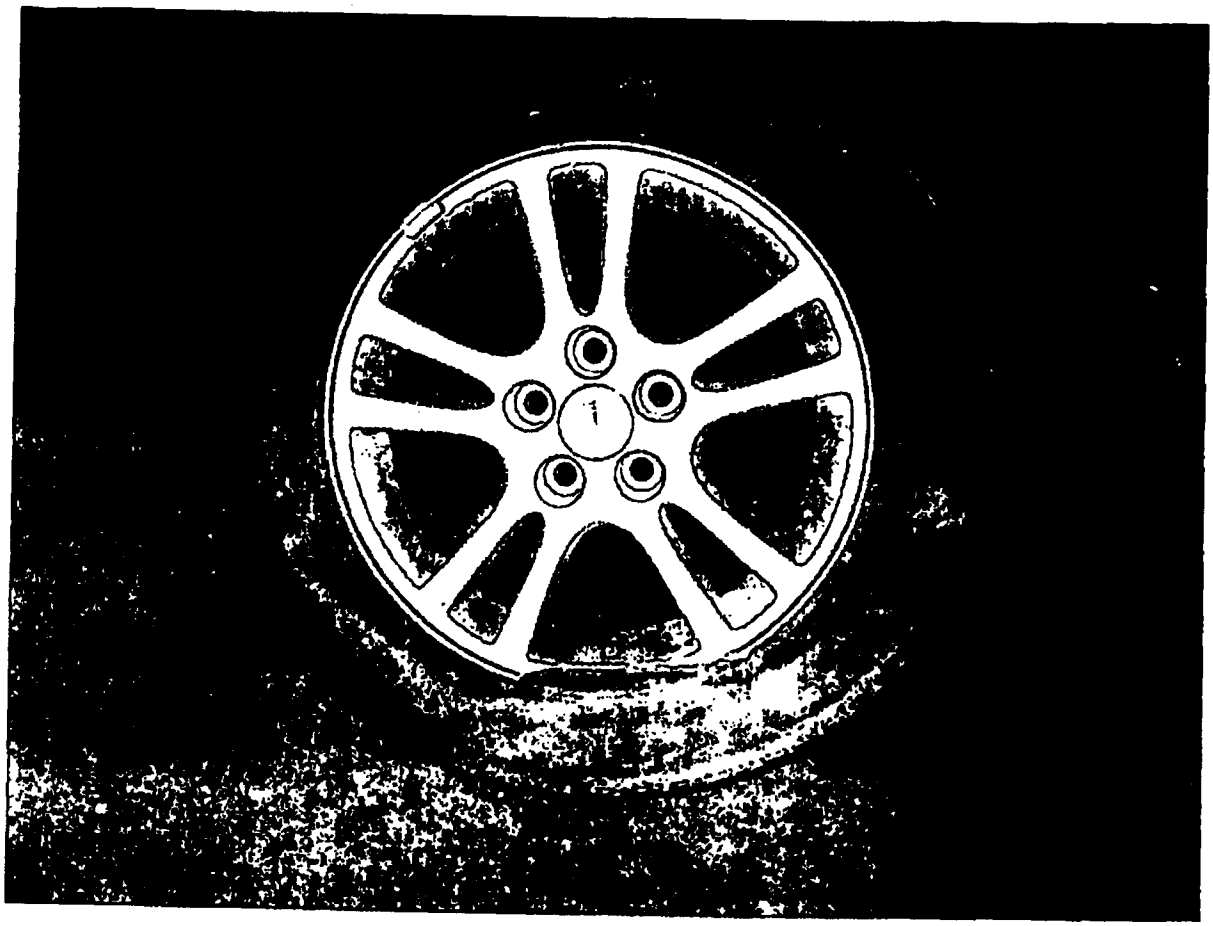
Photos Claim Number: [redacted] Print





COPY

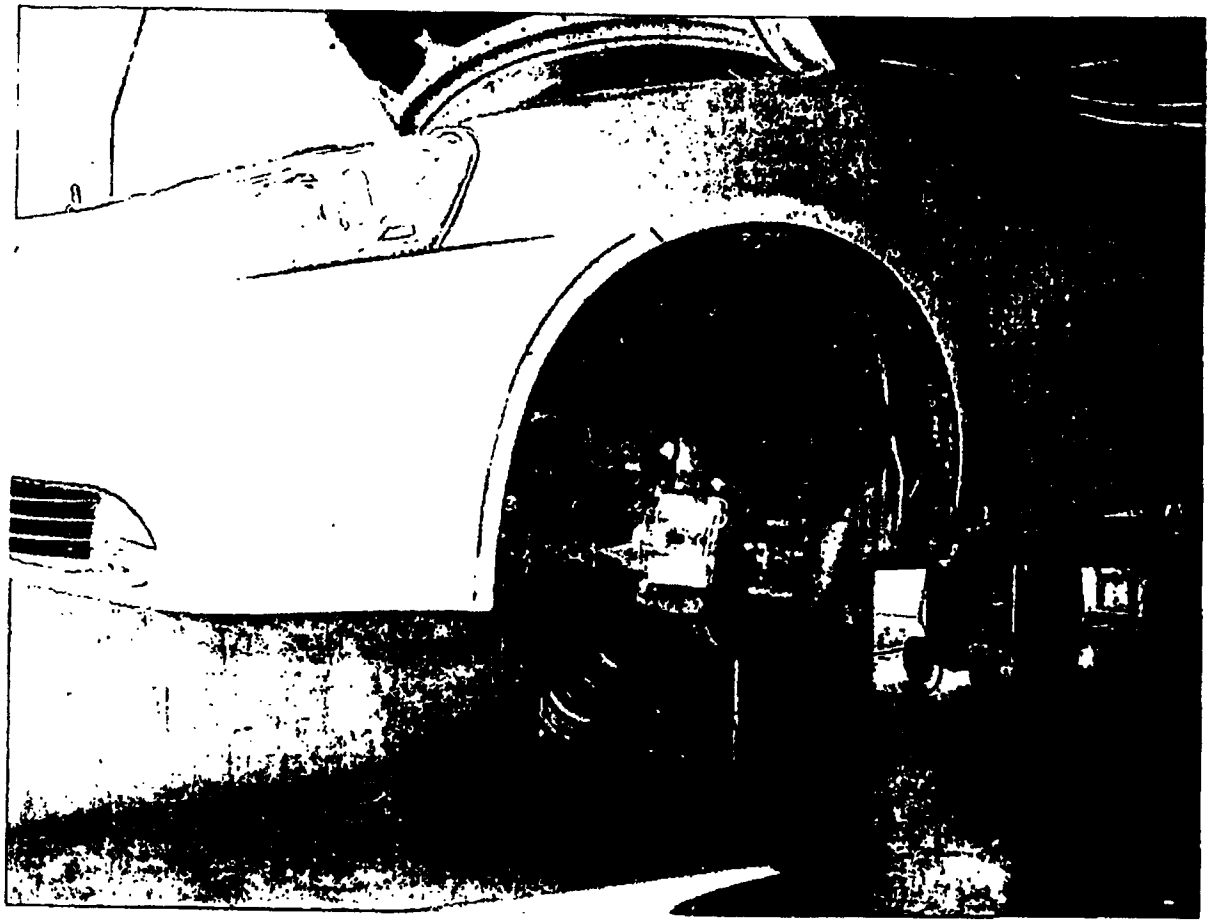
COPY



COPY

COPY

COPY



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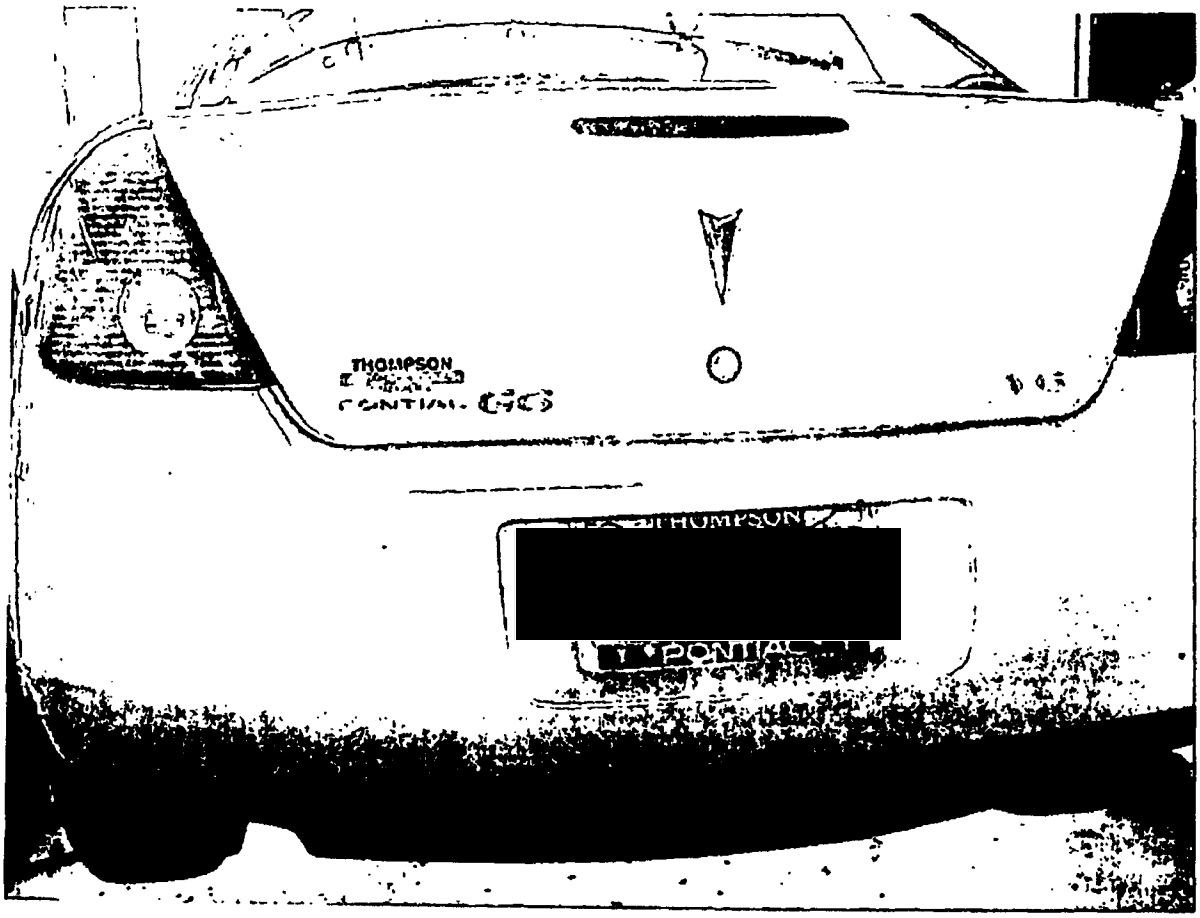
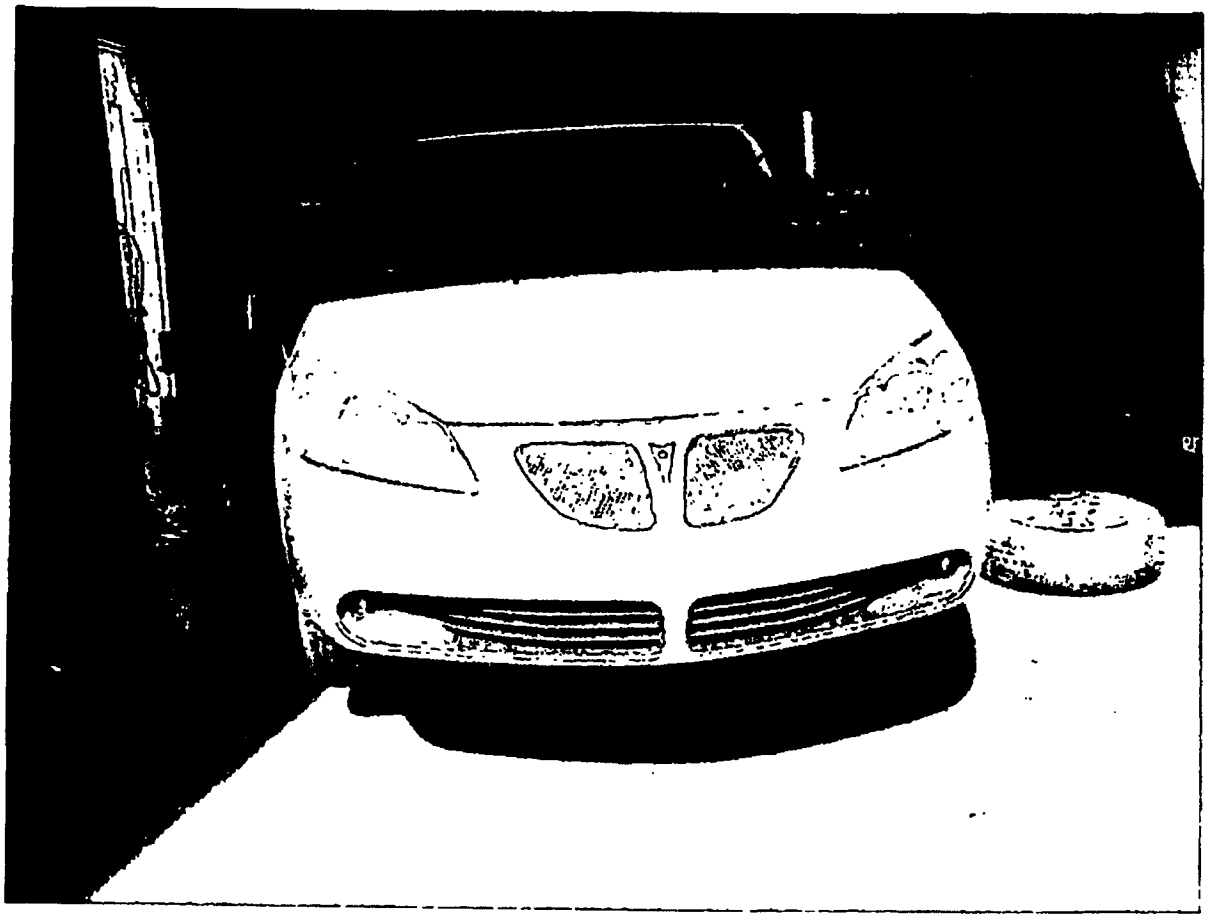
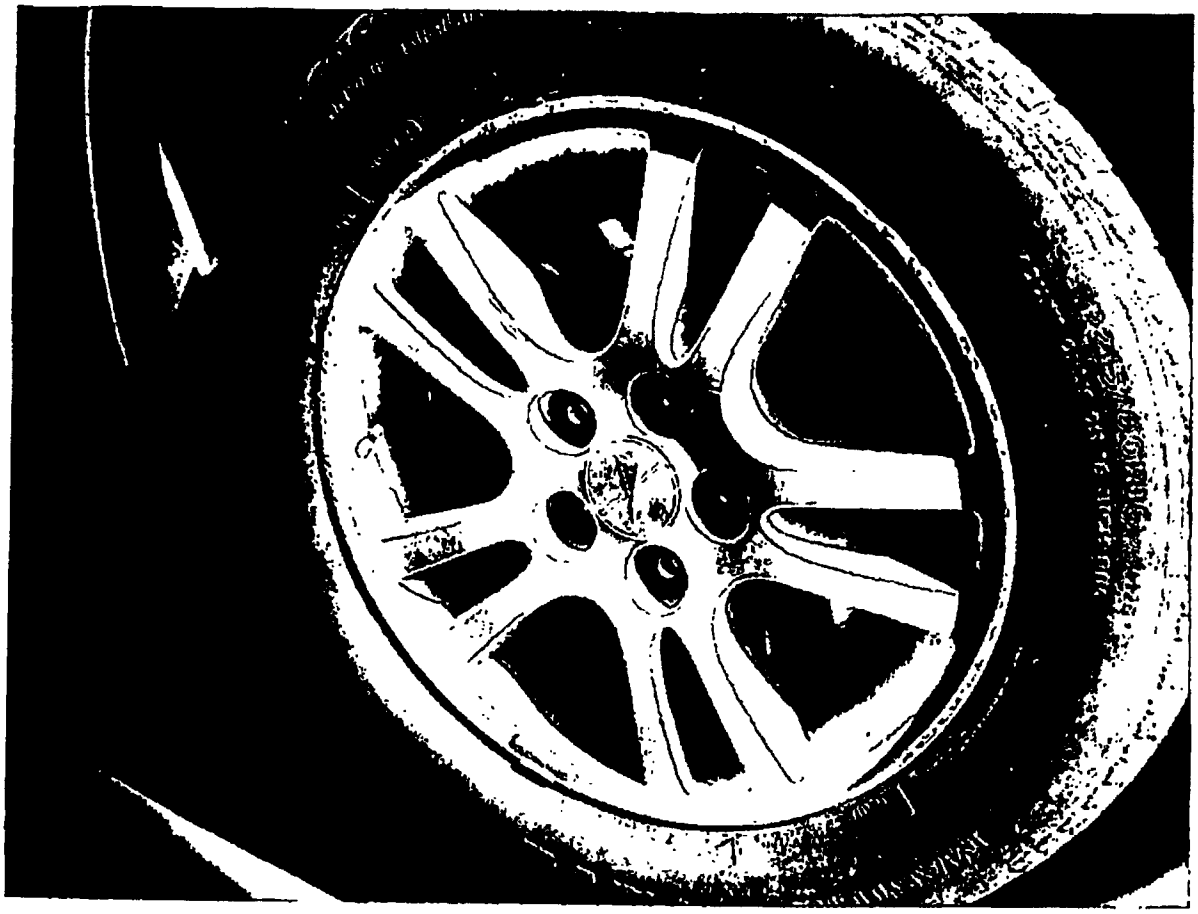


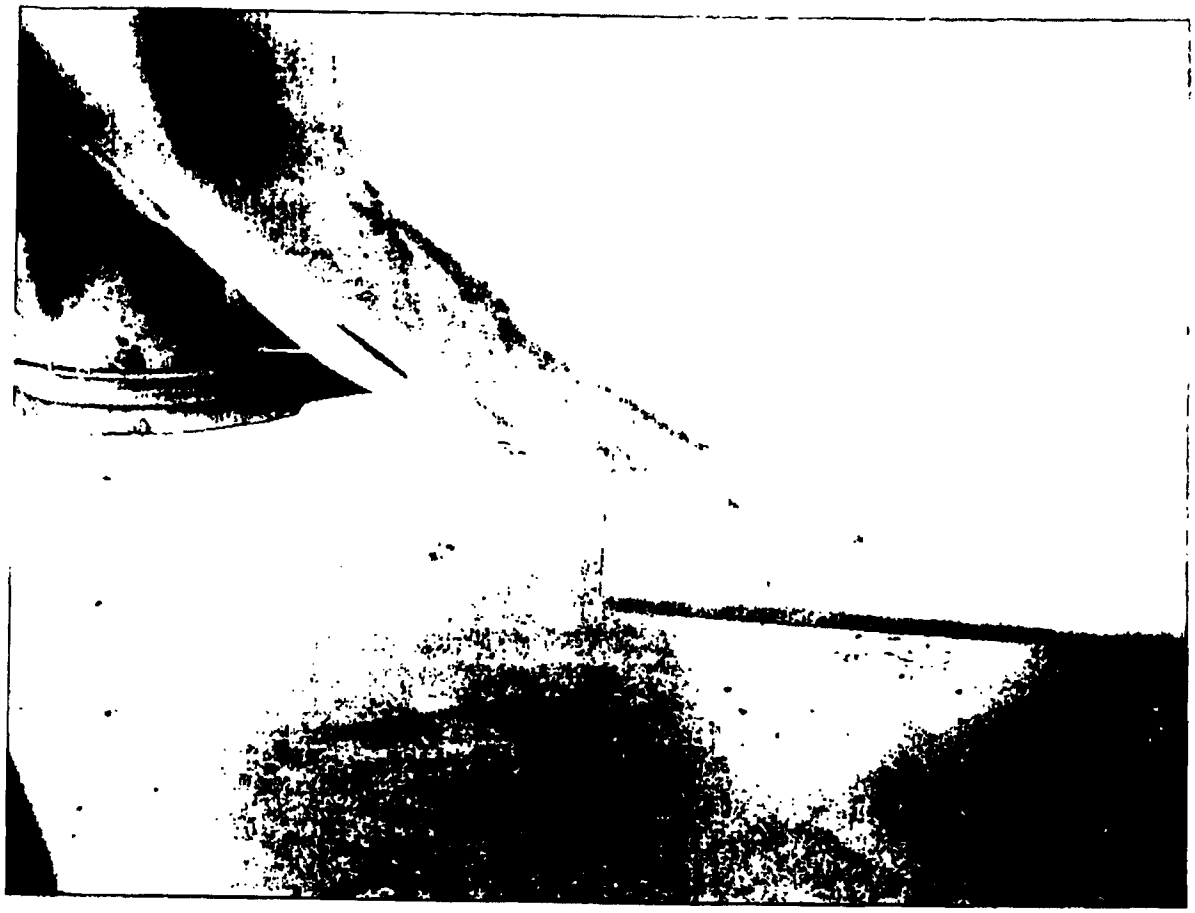
COPY



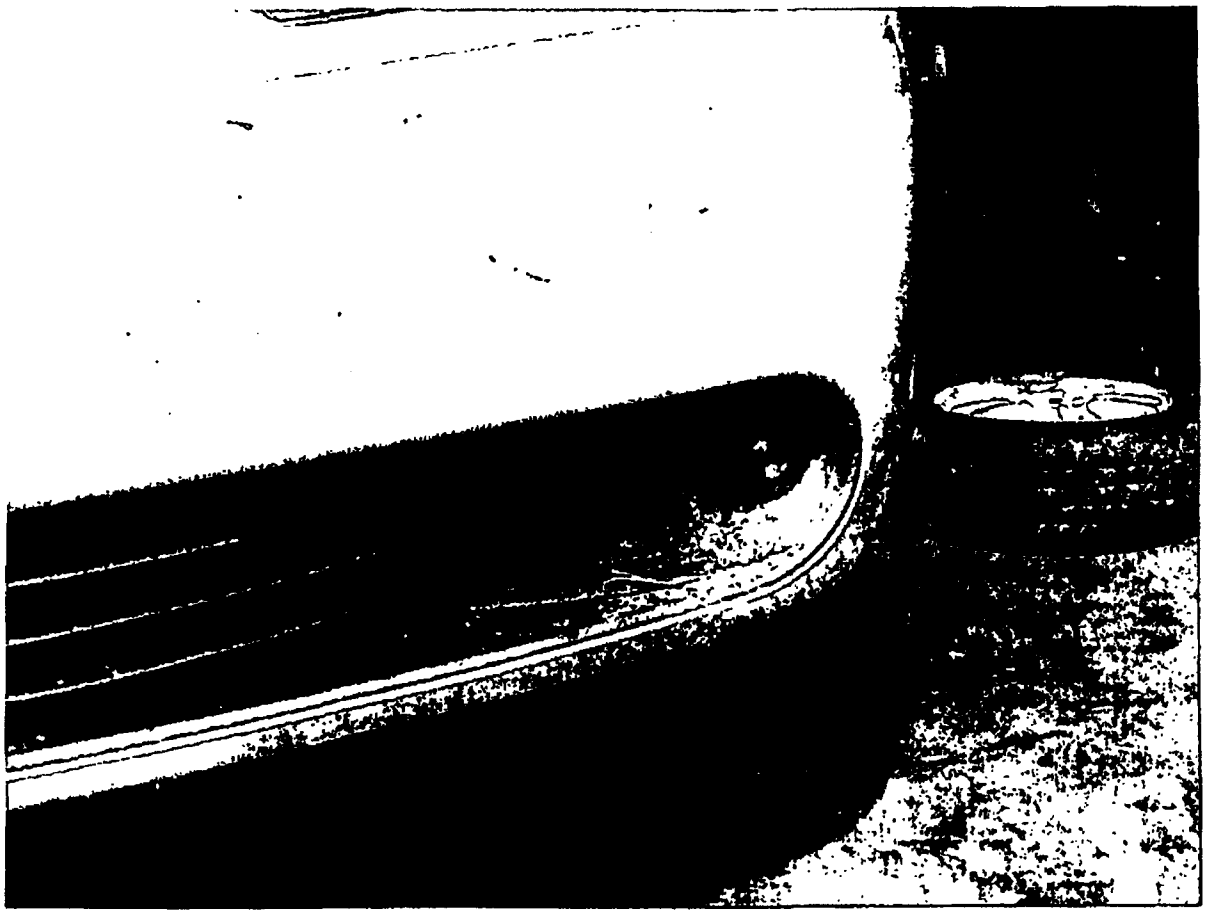
COPY



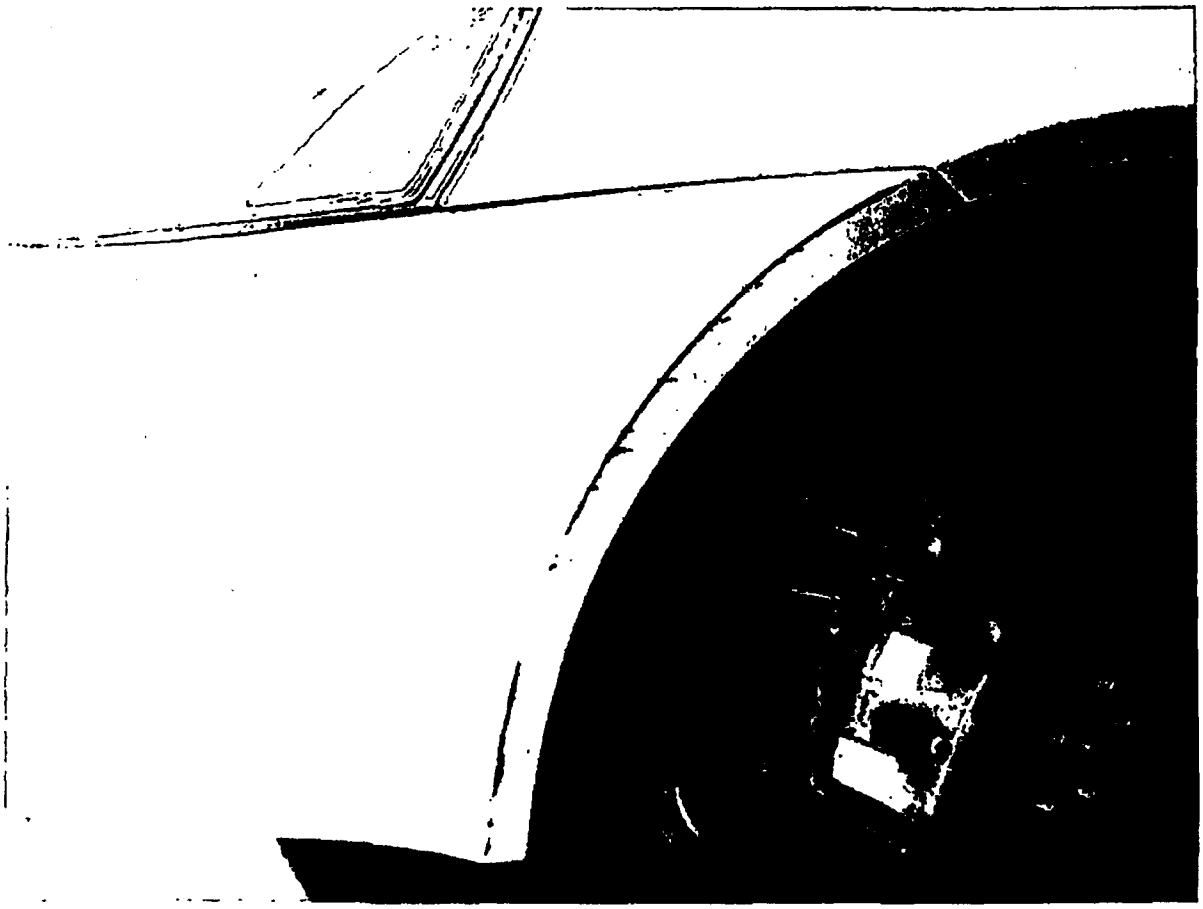
COPY



COPY



COPY



COPY

ARMS AMICA INS

Rental Company: ENTERPRISE RENT-A-CAR
Invoice: D206563-53J6

Bill To:
AMICA INS
ATTN: JUDY BROWN
3201 BEECHLEAF CT SUITE 300
RALEIGH , NC 27604

RENTER INFORMATION:
Renter: [redacted]

RENTAL INFORMATION:
Rental Branch Location:
ENTERPRISE RENT-A-CAR (53J6)
7519 US HIGHWAY 64 E
KNIGHTDALE, NC 275459274
(919) 217-9444

ADDITIONAL CLAIM INFORMATION:

Claim Number : [redacted]
Claim Type: Insured
Vehicle Condition: Non-Driveable
Date Of Loss: 10/19/07
Insured Name: [redacted]
Owner's Vehicle: 2005 PONTIAC G6
Additional Driver:

Repair Facility:
TRUE2FORM-CAPITAL BLVD (#501)
RALEIGH,, NC 27604
(919) 872-2213

Billing Detail:

Rental Period: 10/19/07 to 11/13/07 (26 days)
Billed Period: 10/19/07 to 11/13/07 (26 days)

Description	Rate:	Amount:
26 DAYS @	$23.99	$623.74
26 VLF	$0.39	$10.14
1 SURCHARGE%	%8.00	$50.71
1 HU TAX	%8.00	$50.71
TOTAL CHARGES:		$735.30
Less Amount Received:		$0.00
AMOUNT DUE.....		$735.30

0 • *
30 • *
26 • =
780 • *

VEHICLES RENTED

Effective Date and Time	Year	Make	Model	VIN	Mil
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366
10/19/07 2:50 PM	2008	DODG	AVEN	1B3LC46KX8N[redacted]	366

COD

Rental Invoice

Please Return This Portion with Remittance

Make Payment To:
ENTERPRISE RENT-A-CAR (53EE)
2860 SLATER RD
MORRISVILLE,, NC 275608436
Federal ID:43-1241935

Total Charges: $735.30
Less Amount Received: $0.00
Total Amount Due..... $735.30

Please include on your check:
Invoice: D206563-53J6

OB
11/15

NOTEBOOK:

[redacted]

11/15/07	8:41 AM	S - Invoice approved for payment by JUDY BROWN
	6:42 AM	R - Invoice received for an amount due of $735.30
11/14/07	8:16 AM	R - Ticket 206563 closed on 11/13/07 at 9:22 AM.
11/13/07	9:23 AM	R - DROPPED @ T2FORM
		R - Ticket has been close pended on 11/13/07.
	8:52 AM	S - Last authorized day will be 11/13/07.
		S - Last day of rental set by BROWN, JUDY at 8:52 AM.
		S - Last Day Set -- Repairs complete -- If vehicle is
		S - ready-owner needs to pick up!
11/12/07	3:44 PM	R - BODY SHOP UPDATED
	3:12 PM	R - Waiting For Authorization To Repair
		R - Waiting on Customer to Pick Up Vehicle
		R - vehicle ready today
11/9/07	4:00 PM	S - Message sent by BROWN, JUDY at 3:00 PM.
		S - Authorization changed by BROWN, JUDY at 4:00 PM.
		S - Rental extended by BROWN, JUDY at 4:00 PM for 3 day(s).
		S - Extended 3 days at $30.00/day.
		S - CALL FROM GEORGE @ T2F. W/S HAD A CRACK AND HAS
		S - BEEN REPLACED; HOWEVER, ONE OF THE WIPER ARMS
		S - BROKE IN THE W/S INSTALLATION PROCESS. THERE ARE
		S - NO AVAILABLE PARTS AT LOCAL DEALER AND WAS
		S - EXPECTING THE PART OVERNITE, BUT IT DID NOT ARRIVE
		S - TODAY. SHOULD BE IN ON MONDAY. ADV GEORGE
		S - OKAY-RENTAL WILL BE AT 25 DAYS ON MONDAY.
	10:22 AM	S - Authorization changed by BROWN, JUDY at 10:22 AM.
		S - Rental extended by BROWN, JUDY at 10:22 AM for 1 day(s).
		S - Extended 1 days at $30.00/day.
	9:37 AM	R - Rental extension requested for 1 day(s).
		R - Authorization requested through 11/9/07.
		R - Estimated Completion Date is 11/09/07
		R - Repairs in Progress
		R - Reassembly
11/5/07	8:24 AM	S - Authorization changed by GARRETT, SUE at 8:24 AM.
		S - Rental extended by GARRETT, SUE at 8:24 AM for 6 day(s).
		S - Extended 6 days at $30.00/day.
11/2/07	11:50 AM	R - Rental extension requested for 6 day(s).
		R - Authorization requested through 11/8/07.
		R - PER BRAD@BS VEH STILL IN BODY WORK ECD
		R - 110607 PLS ADVISE ON FURTHER EXT OR LAST DAY
10/30/07	1:34 PM	S - Authorization changed by BROWN, JUDY at 2:34 PM.
		S - Rental extended by BROWN, JUDY at 2:34 PM for 4 day(s).
		S - Extended 4 days at $30.00/day.
	1:31 PM	R - Rental extension requested for 4 day(s).
		R - Authorization requested through 11/2/07.
		R - AMI5399**SHOP INFO UPDATE AGAIN VEH IN BODY
		R - @TRUE2FORM CAPITOL HAS TARGET 110207
	1:23 PM	R - CUSTOMERS CAR IS AT THIS LOCATION. CONFIRMED
		R - WITH T2F EMPLOYEE ON 10/30/07.
	1:15 PM	R - AMI5339**PER TRUE2FORM NEWBERN VEHICLE NOT
		R - REPAIRED THERE DO YOU KNOW SHOP INFO??
	8:41 AM	S - Message sent by BROWN, JUDY at 8:41 AM.
		S - EXTENSION NOT GRANTED UNTIL THERE IS A STATUS
		S - UPDATE FROM THE BODY SHOP.
	8:10 AM	S - PLEASE CHECK WITH THE SHOP FOR REPAIR STATUS.

	S - Message sent by BROWN, JUDY at 8:10 AM.
10/29/07 2:44 PM	S - PLEASE CHECK WITH THE SHOP FOR REPAIR STATUS.
	S - Message sent by BROWN, JUDY at 2:44 PM.
2:32 PM	R - Rental extension requested for 2 day(s).
	R - Authorization requested through 10/31/07.
	R - UPDATE SHP TO TRUE TO FORM NEWBERN PLS
	R - ADVISE ON FURTHER EXT OR LAST DAY
10/26/07 12:19 PM	S - Message sent by BROWN, JUDY at 12:19 PM.
	S - Authorization changed by BROWN, JUDY at 1:19 PM.
	S - Rental extended by BROWN, JUDY at 1:19 PM for 3 day(s).
	S - Extended 3 days at $30.00/day.
	S - CAR IS SHOULD BE BACK AT TRU2FORM. IT WAS BEING
	S - DIAGNOSED FOR MECHANICAL ISSUES AT A DIFFERENT
	S - SHOP.
12:14 PM	R - Rental extension requested for 3 day(s).
	R - Authorization requested through 10/29/07.
	R - AMI5399**PLEASE ADVISE OF SHP INFO IF
	R - KNOWN 53WC**
10/24/07 1:22 PM	S - Authorization changed by BROWN, JUDY at 2:22 PM.
	S - Rental extended by BROWN, JUDY at 2:22 PM for 4 day(s).
	S - Extended 4 days at $30.00/day.
1:18 PM	R - PLEASE ISSUE EXT.
1:03 PM	R - Rental extension requested for 4 day(s).
	R - Authorization requested through 10/26/07.
	R - PER SHP VEH IS NOT THERE AT TRUE2FORM
	R - NEWBERN PLS ADVISE
10/19/07 4:10 PM	S - Authorization changed by BROWN, JUDY at 5:10 PM.
	S - Rental transferred to BROWN, JUDY
	S - Rental transferred from AAUNASSIGNED, RENTAL
	S - Rental transferred by BROWN,JUDY at 4:10 PM.
1:58 PM	R - Ticket 206563 opened on 10/19/07 at 2:50 PM.
12:16 PM	S - Authorization sent at 1:16 PM for 4 days at $30.00/day.
	S - Authorization sent with $30.00/day / $900.00/max.
	S - Authorized by ROWELL TAUNYA.
	S - Assigned to AAUNASSIGNED RENTAL.
	S - Direct Bill Authorization set at 100 %
	R - Authorization confirmed by Enterprise at 12:16 PM.
	R - Reservation number 044002.

S= Sent, R= Received, N= Note To Self

* Time is displayed based on your local time zone: GMT-05:00

[redacted]

Amica
Auto Home Life

AMICA MUTUAL INSURANCE COMPANY

CORPORATE OFFICE - LINCOLN, RHODE ISLAND

53-7520/313
SOVEREIGN BANK

2089275

NOVEMBER 15, 2007

CLAIMS ACCOUNT

FOR A LOSS ON 10/19/2007 OR FOR SERVICES RENDERED UNDER POLICY NO. 98C432-1091

CLAIM FILE NUMBER L09200703121D INSURED ROBERT L. ARRIAGA

PAY *3,508*DOLLARS AND 85 CENTS $3,508.85

TO THE ORDER OF [redacted]
RALEIGH, NC [redacted]

Mary R. Williamson
TREASURER

Amaga
17382

[redacted]

477258

This is watermarked paper and contains invisible dyes.
Do not accept without noting watermark.
Hold to light to verify watermark.

PAY TO THE ORDER OF
FIRST UNION NATIONAL BANK
⑆ 053000219 ⑆
FOR DEPOSIT ONLY
TRUESFORM COLLISION REPAIR CENTERS
CAPITAL BLVD. 49501

Do Not Endorse Below This Line

E1004

0426194250 INCLUDING
1120200047 E34 PO SOVEREIGN
0111-0018 20/2007
ENT=2075 TRC=2074 PK=16 11/19/2007
0839639264

>0312007300000 51381520

COI 7

[redacted]

Amica
Auto Home Life

AMICA MUTUAL INSURANCE COMPANY
CORPORATE OFFICE - LINCOLN, RHODE ISLAND

59-7524/113
SOVEREIGN BANK

2090155

NOVEMBER 15, 2007

CLAIMS ACCOUNT
FOR A LOSS ON 10/19/2007 OR FOR SERVICES RENDERED UNDER POLICY NO. 080432-1001
CLAIM FILE NUMBER L092007011331D INSURED ROBERT L. ARAIAGA

PAY *511*DOLLARS AND 07 CENTS $511.07

TO THE ORDER OF [redacted] RALEIGH, NC [redacted]

Mary R. Williamson
TREASURER

Arriaga
17382 [redacted]

477269

This is watermarked paper and contains invisible ink.
Do not accept without seeing watermark.
Hold to light to verify watermark.
PAY TO THE ORDER OF
FIRST UNION NATIONAL
FOR DEPOSIT O
TRUEFORM COLLISION R
CAPITAL BLVD.
Do Not Endorse Below This Line

END-9

COPY

0426194240 INCIDERING
112020000047 E34 FO SOVEREIGN
0111-0041 20/2007
ENT=2075 TRC=2074 PK=16
0839639263

>0312007300000 5136153 0 11/19/2007

Class - Siebel Docs

RequestNum
71-597821681

MSXDocNum
0800901296

Last
ARRIAGA

First
ROBERT

Timestamp
2008-01-09-15.26.47.000000

Division
CH

CorrType
C

CatCode
29

MSXSource
M

AttachNum

VIN

esis

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Deborah Chisholm
Claims Administrator

02/12/2008

Judy D. Brown
Amica Mutual Insurance Company
4800 Falls of Neuse Rd., Ste 320
Raleigh, NC 27609-8140

RE:	Claimant:	[redacted]
	Our File No.:	643415
	Your File No.:	LO9200703131D
	Our Client:	General Motors Corporation
	Date/Event:	10/19/2007
	Subject vehicle:	2005 Pontiac G6
	VIN:	1G2ZG528354[redacted]

Dear Ms. Brown:

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors concerning your insured. Your correspondence alleges that your insured sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

1. Please provide a **copy** of your expert report and **color copies** of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

esis

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage **estimate** and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Deborah Chisholm
Claims Administrator

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Deborah Chisholm
Claims Administrator

March 14, 2008

Amica Insurance
4800 Falls of Neuse Rd Ste 320
Raleigh, NC 27609-8140

RE: Claimant: [redacted]
Our File No.: 643415 (Yours: LO9200703131D)
Our Client: General Motors Corporation
Date/Event: 10/19/07
Subject vehicle: 2005 Pontiac G6
VIN: 1G2ZG528354[redacted]

Dear Ms. Brown:

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors concerning your insured. Your correspondence alleges that your insured sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

1. Please provide a **copy** of your expert report.

2. The accident report reflects that the claimant felt that the incident may have been caused due to some front end vehicle repairs that were performed on the vehicle a few days before this incident. How were these repairs ruled out as a possible cause of the loss?

3. Please provide us with your demand amount.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

5

Sincerely,

Deborah Chisholm
Claims Administrator

Estimate #5832852 Print Toggle Pictures

True2Form Collision - Raleigh, NC

ESTIMATE OF RECORD

Insured/Owner Information

Insured	[redacted]
Owner	
Address Line 1	
Address Line 2	
City	KNIGHTDALE
State Zip	NC [redacted]
Phone1	
Phone2	
Fax	
Email	

Insurance Company Information

Company Type ID	
Company Number	
Company Name	Amica - Raleigh Regional
Address Line 1	4800 Falls of Neuse Road, Suite 320
Address Line 2	
City	Raleigh
State Zip	NC 27609
Phone	(800) 892-6422
Fax	(866) 381-3243
Company Email	
Contact Name	
Contact Title	
Contact Phone	
Contact Email	

Adjuster Information

Name	Judy Brown
Company	Amica - Raleigh Regional
Address Line 1	4800 Falls of Neuse Road
Address Line 2	Suite 320
City	Raleigh
State Zip	NC 27609
Work Phone	800-892-6422 x45336
Fax	
Email	JBROWN3@AMICA.COM

Inspection Location Information

Inspection Location	Other
Address Line 1	100 Towne Villiage Rd
Address Line 2	
City	Carey
State Zip	NC 27513
Phone1	
Phone2	
Fax	
Contact Name	
Contact Email	

Appraiser Information

Written By	GEORGE PERRY
Company ID Code	
Company Name	True2Form Collision - Raleigh, NC
Address Line 1	2821 Capital Blvd.
Address Line 2	
City	Raleigh
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Email	capitalblvd@true2form.com
License No	
File No	

Repair Facility Information

Facility ID Code	
Facility	TRUE 2 FORM - CAPITAL BLVD
Address Line 1	CAPITAL LOCATION
Address Line 2	2821 CAPITAL BLVD.
City	RALEIGH
State Zip	NC 27604
Phone1	(919) 872-2213
Phone2	
Fax	(919) 872-9331
Fed Tax ID	341910878
License No	
Bar No	
Contact Name	
Contact Email	

Claim Information

Claim No	L09200703131D
Claimant No	1
Policy No	9804321091
Loss Type	Collision
Deductible	$500.00

Estimate Information

Estimating Platform	CCC Pathways
Est Sw Version	4.40.02
Est Sw Unique File ID	CC02JRV3
Est Sw Supplement No	S01
Est Sw Transation Type	S
Est Sw Committed Status	Committed
PC Supplement No	256

Calendar of Events

Loss Date	10/19/2007
Assignment	10/22/2007
Inspection	10/19/2007
Est Sw Created	11/15/2007
PC Created	11/15/2007 7:26:06 AM

Miscellaneous

Notes

Comments

Vehicle Information

Database Code	DR1FQ05	Model	G6	Paint Tone	1
License Plate No	[redacted]	Type	PC	Paint Stage	2
License Plate State	NC	Body Style	4D SED	Paint Code 1	
VIN	1G2ZG528354 [redacted]	Trim Code		Paint Code 2	
Condition		Trim Color		Paint Code 3	
Production Date	10/2004	Molding Code		Primary Point of Impact	Left Front Corner
Year	2005	Engine	6-3.5L-FI	Secondary Points of Impact	
Make Code	PONT	Mileage	56496		
Make Description		Color	Silver		

Equipment Options

Automatic Transmission, Overdrive, Bucket Seats, Cloth Seats, Reclining Seats, Power Steering, Tilt Wheel, Power Brakes, 4 Wheel Disc Brakes, Rear Defogger, Power Windows, Full Wheel Covers, AM Radio, FM Radio, Stereo, Search/Seek, CD Player, Power Locks, Power Trunk/Tailgate, Air Conditioning, Cruise Control, Driver Air Bag, Passenger Air Bag, Console/Storage, Digital Clock, Intermittent Wipers, Power Mirrors, Dual Mirrors, Body Side Moldings, Fog Lamps, Keyless Entry, Clear Coat Paint

Line Items

Line #	Ver	Operation	Part Type	Description	OEM/Vendor Part Number	Qty	Price	Ext	Part Adj %	Part Adj Amt	Labor Units	Labor Type	System Notes
1				FRONT BUMPER									
2	E	Remove/Install		R&I bumper cover	19120467						1.6	Body	
3	E	Repair		Bumper cover	19120467						2.0	Body	
3	E	Repair		Bumper cover							2.8	Refinish	
4	E			Add for Clear Coat							1.1	Refinish	
5	S1	R&R	OEM	Emblem	25771372	1	33.38 T	33.38			0.2	Body	
6	E	Remove/Install		RT Lower grille	15243287						0.2	Body	
7	E	Remove/Install		LT Lower grille	15243286						0.2	Body	
8				GRILLE									
9	E	Remove/Install		RT Grille	22699328						0.2	Body	
10	E	Remove/Install		LT Grille	22699329								
11				FRONT LAMPS									
12	E	Remove/Install		RT Fog lamp assy	15162675						0.3	Body	
13	E	Remove/Install		LT Fog lamp assy	15162675						0.3	Body	
14	E	Remove/Install		LT Headlamp assy	15835750								
15				RADIATOR SUPPORT									
16	S1	R&R	OEM	LT Side shield 3.5 & 3.9 liter coupe & s	15809317	1	18.29 T	18.29			0.3	Body	
17				HOOD									
18	E	Blend		Hood	15801208						1.4	Refinish	
19	S1	Remove/Install		Insulator	15890356						0.3	Body	
20	S1	R&R	OEM	Insulator retainer	22718305	8	1.69 T	13.52					
21				WINDSHIELD									
22	S1	Sublet	None OEM Glass (Nags)	Windshield NAGS +10%	DW01603	1	300.00	300.00	10.00 %	30.00			
23	S1	R&R	OEM	RT Wiper arm	15797483	1	38.63 T	38.63			0.2	Body	
24	S1	R&R	OEM	RT Wiper blade	15779415	1	29.00 T	29.00			0.1	Body	
25	S1	R&R	OEM	RT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
26	S1	R&R	OEM	LT Nozzle	15247800	1	16.26 T	16.26			0.2	Body	
27				FENDER									
28	E	R&R	OEM	LT Fender	15292019	1	169.30 T	169.30			2.0	Body	
28	E	R&R		LT Fender							1.8	Refinish	
29	E			Add for Clear Coat							0.7	Refinish	
30	E			Add for Edging							0.5	Refinish	
31	E			Deduct for Overlap							-0.3	Body	
32	E	R&R	OEM	LT Fender liner	15255732	1	34.73 T	34.73					
33	E	R&R	OEM	LT Fender liner retainer	10121502	6	0.33 T	1.98					
34	E	Repair		LT Rear panel	15780004						3.0	Body	
34	E	Repair		LT Rear panel							0.5	Refinish	
35				WHEELS									
36	E	R&R	Re-Chrome	RECOND LT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
37	E	R&R	Re-Chrome	RECOND RT/Front Wheel, alloy 16"	89060324	1	174.99 T	174.99			0.3	Body	
38	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
39	E	R&R	Other	VALVE STEM		1	2.95 T	2.95					
40	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
41	E	Sublet	Sublet	MOUNT & BALANCE SUBLET		1	15.00	15.00					
42	E	Sublet	Sublet	4 WHEEL ALIGNMENT		1	69.95	69.95					

43	S1	R&R	Other	L/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95				
44	S1	R&R	Other	R/F Tire Mastercraft all season P215/60R		1	84.95	T	84.95				
45	S1	Sublet	Sublet	Scrap tire fee		1	4.00		4.00				
46	S1	Sublet	Sublet	Tire recycling fee		1	3.50		3.50				
47	S1	R&R	Aftermarket	A/M Wheel nut alloy wheel		2	3.25	T	6.50				
48				FRONT SUSPENSION									
49	E			O/H frt susp lt							3.0	Body	
50	S1	R&R	OEM	LT Hub & bearing	15793213	1	281.93	T	281.93				
51	E	Repair		Deduct O/H frt susp							-3.0	Body	
52	E	R&R	OEM	LT Brake hose	22729634	1	22.67	T	22.67				
53	E	Sublet		Bleed brake system									
54	S1	R&R	Other	Brake fluid		1	4.50	T	4.50				
55	S1	R&R	OEM	LT Knuckle	21995733	1	172.66	T	172.66				
56	S1	R&R	OEM	LT Lower cntrl arm	22730775	1	187.93	T	187.93				
57	E			Deduct for Overlap									
58	S1	R&R	OEM	LT Strut w/ride & handling suspension	88964544	1	120.22	T	120.22				
59	E			Deduct for Overlap									
60	S1	R&R	OEM	LT Stabilizer link	22670300	1	43.12	T	43.12				
61	E			Deduct for Overlap									
62	S1	R&R	OEM	LT Axle assy	10379129	1	248.10	T	248.10				
63	E			Deduct for Overlap							-0.5	Body	
64	E	Repair		Add back labor deduction							0.5	Body	
65	S1	Sublet	Sublet	Labor to install frt suspension componen		1	396.20		396.20				
66				PILLARS, ROCKER & FLOOR									
67	S1	R&R	OEM	LT Rocker molding	15209853	1	109.54	T	109.54		0.5	Body	
68				FRONT DOOR									
69	E	Repair		LT Outer panel (front edge)	15146085						0.5	Body	
69	E	Repair		LT Outer panel (front edge)							2.0	Refinish	
70	E			Overlap Major Adj. Panel							-0.4	Refinish	
71	E			Add for Clear Coat							0.3	Refinish	
72	E	Remove/Install		LT Belt molding	15889536						0.2	Body	
73	E	Blend		LT Body side mldg	89024127						0.2	Refinish	
74	E	Remove/Install		LT Mirror assy	15278129						0.3	Body	
75	E	Remove/Install		LT Handle, outside	22672194						0.4	Body	
76	E	Remove/Install		LT R&I trim panel	15806821						0.4	Body	
77	E	Sublet	Sublet	Towing		1	80.00		80.00				
78	E	Sublet	Sublet	Tow to Atlantic Avenue Tire for sublet r		1	45.00		45.00				
79	E	R&R	Other	CORROSION PROTECTION		1	10.00		10.00		0.5	Body	
80	E	Refinish		TINT COLOR TO BLENDABLE MATCH							0.5	Refinish	
81	E		Other	COVER CAR TO PAINT		1	5.00		5.00				
82	E		Other	HAZARDOUS WASTE REMOVAL		1	5.00		5.00				
83	S1			FINAL BILL PLEASE PAY SHOP DIRECTLY									

Summary

	Type	Supp	Units / Amt	Rate	Other	Misc	Base	Markup	Discount	Gross	Tax Rate	Totals
Parts												

	OEM		-	-	-	-	1557.52	0.00	0.00	1557.52	6.7500%	
	Aftermarket		-	-	-	-	6.50	0.00	0.00	6.50	6.7500%	
	Re-Chrome		-	-	-	-	349.98	0.00	0.00	349.98	6.7500%	
	Other		-	-	-	-	200.30	0.00	0.00	200.30	6.7500%	
	None OEM Glass (Nags)		-	-	-	-	300.00	30.00	0.00	330.00		
	Total Parts		-	-	-	-	**2414.30**	**30.00**	**0.00**	**2444.30**	-	**2444.30**
Labor												
	Body	E01	13.40	40.00		-	536.00	0.00	0.00	536.00		
	Body	S01	1.00	40.00		-	40.00	0.00	0.00	40.00		
	Refinish	E01	11.40	40.00		-	456.00	0.00	0.00	456.00		
	Total Labor		-	-		-	**1032.00**	**0.00**	**0.00**	**1032.00**	-	**1032.00**
Material												
	Paint		11.40	24.00	262.20	999.00	273.60	-	-	273.60		
	Total Material		-	-	262.20	-	**273.60**	**0.00**	**0.00**	**273.60**	-	**273.60**
Sublet												
	Sublet		-	-	-	-	628.65	0.00	0.00	628.65		
	Total Sublet		-	-	-	-	**628.65**	**0.00**	**0.00**	**628.65**	-	**628.65**
Other Charges												
	Total Other Charges		-	-	-	-		**0.00**	**0.00**		-	**0.00**
Taxes												
	Sales Tax		2094.30	6.7500%	-	-	141.37	-	-	141.37	-	
	Total Taxes		-	-	-	-	**141.37**	**0.00**	**0.00**	**141.37**	-	**141.37**
Estimate Totals												
	Estimate Total											**4519.92**
	Previous Total											4008.85
	Current Supplement											511.07
Customer Pay												
	Deductible									500.00	-	
	Related Prior Damage										-	
	Appearance Allowance										-	
	Betterment										-	
	Customer Total											**500.00**
Insurance Pay												
	Insurance Pay											**4019.92**

Charges At-A-Glance

Estimate has no charges.

Vendor Info

Estimate has no relevant vendor information.

This estimate has been prepared based on the use of automobile parts not made by the original manufacturer. Parts used in the repair of your vehicle by other than the original manufacturer are required to be at least equal in like kind and quality in terms of fit, quality, and performance to the original manufacturer parts they are replacing. In the repair of your covered auto under the physical damage coverage provisions of this policy, we may require or specify the use of automobile parts not made by the original manufacturer. There parts are required to be at least equal in terms of fit, quality, and performance to the original manufacturer parts they replace.

#2

DMV-349 (Rev. 3/2000)

1

THIS REPORT IS FOR THE USE OF THE DIVISION OF MOTOR VEHICLES. THE DATA IS COLLECTED FOR STATISTICAL ANALYSIS AND SUBSEQUENT HIGHWAY SAFETY PROGRAMMING. DETERMINATIONS OF "FAULT" ARE THE RESPONSIBILITY OF INSURERS OR OF THE STATE'S COURTS.

Do not write in these spaces: 102089524

No. of Units Involved: Form 1 of 1 ☐ Supplemental Report ☐ Non-Reportable

Date	County	Time	Local Use/Patrol Area	Date Received by DMV
10/19/2007	WAKE	08:34	0107003249/19	10/20/2007

LOCATION: 33 Relation to Roadway Surface 1 Crash occurred ☒ in / near CARY ☐☐☐☐ Miles N S E W outside municipality

on CARY GLEN BLVD (Municipality) ☐ Ramp or Service Road (RR Crossing #_____) ☐☐☐☐ Miles N S E W (0 if at intersection) (if available)

at #### RP 1625 (Use Highway Number, Street Name or Adjacent County or State Line) ☒ N ☐ S ☐ E ☐ W toward RP 1624 (Use Highway Number, Street Name or Adjacent County or State Line)

Latitude / Longitude / Altitude

UNIT # 1 ☒ VEHICLE ☐ PEDESTRIAN ☐ HIT & RUN ☐ COMMERCIAL 20 VEHICLE

Driver: [redacted] (First, Middle, Last, Suffix)

Address: [redacted]

City KNIGHTDALE State NC Zip [redacted]

Same Address as Driver's License? ☒ Yes ☐ No — Driver's Phone Numbers H [redacted] W ( )

D.L. [redacted] State NC

CDL License ☐

DOB [redacted] (mm/dd/yyyy) 34 Vision Obstruction 00 35 Physical Condition 01 36 D.L. Restrictions 0

37 Alcohol Driver Suspected 0 38 Alcohol/Drugs Test 0 39 Results (if known) 0 40 Vehicle Seizure (DWI) ☐

Owner: [redacted]

Address: [redacted] Same Address as Driver? ☒

City KNIGHTDALE State NC Zip [redacted]

Plate # [redacted] Plate State NC Plate Year [redacted]

VIN 1G2ZG528354[redacted]

Vehicle Make PONT Vehicle Year 2005 41 Vehicle Style (Type) 1 42 Vehicle Drivable ☐ Yes ☒ No

43 TAD FC-1 44 Estimated Damage $1000

Insurance Company: AMICA MUTUAL INSURANCE CO

Policy # [redacted]

UNIT # ___ ☐ VEHICLE ☐ PEDESTRIAN ☐ HIT & RUN ☐ OTHER

Driver: (First, Middle, Last, Suffix)

Address:

City State Zip

Same Address as Driver's License? ☐ Yes ☐ No — Driver's Phone Numbers H ( ) W ( )

D.L. # State

CDL License ☐

DOB (mm/dd/yyyy) 34 Vision Obstruction 35 Physical Condition 36 D.L. Restrictions

37 Alcohol Drugs Suspected 38 Alcohol/Drugs Test 39 Results (if known) 40 Vehicle Seizure (DWI) ☐

Owner: Same as Driver? ☐

Address: Same Address as Driver? ☐

City State Zip

Plate # Plate State Plate Year

VIN

Vehicle Make Vehicle Year 41 Vehicle Style (Type) 42 Vehicle Drivable ☐ Yes ☐ No

43 TAD 44 Estimated Damage $

Insurance Company:

Policy #

20 COMMERCIAL VEHICLE: Cargo, Carrier Name, Address, Source

45 Cargo Body Type ☐ Same Address as Owner?

Source: ☐ Truck ☐ Shipping papers ☐ Driver

Carrier Identification Numbers, GVWR, Axles

US DOT# ICC# Axles on Vehicle Including Trailers

State State# IFTA#

FEIN# Fleet# Gross Vehicle Weight Rating

Names and Addresses for All Persons (Unit 1/Unit 2 Drv, Ped, etc. - See Above): Use check blocks if address same as Driver

	21	22	23	24	25	26	27	28	29	30	31	32	
A	1	1	1	Unit1-Drv1, Ped1, etc. see above	O	M	2	1	0	2	1	5	see above Veh# 1 Towed To/By: BRACES/BRACES
B				Unit2-Drv2, Ped2, etc. see above									see above Veh# Towed To/By:
C													
D													
E													
F													
G													
H													

45 Name of EMS: 46 Name of EMS:

47 Injured Taken by EMS to (Treatment Facility and City or Town) 47 Injured Taken by EMS to (Treatment Facility and City or Town)

102089524 - 1

48 POINTS OF INITIAL CONTACT (Write in Codes)	Unit 1 4
	Unit

CRASH SEQUENCE (Unit Level)	Unit 1	Unit
49 Vehicle Maneuver/Action	7	
50 Non-Motorist Action		
51 Non-Motorist Location Prior to Impact		
52 Crash Sequence - First Event for This Unit	55	
53 Crash Sequence - Second Event *		
54 Crash Sequence - Third Event *		
55 Crash Sequence - Fourth Event *		
56 Most Harmful Event for This Unit	55	
57 Distance/Direction to Object Struck	5	
58 Vehicle Underride/Override	3	
59 Vehicle Defects	7	

VEHICLE INFO.	Veh # 1	Veh #
60 Authorized Speed Limit	35	
61 Estimate of Original Traveling Speed	15	
62 Estimate of Speed at Impact	15	
63 Tire Impressions Before Impact (ft.)	0	
64 Distance Traveled After Impact (ft.)	0	
65 Emergency Vehicle Use		
66 Post Crash Fire (if "Yes" check block)	☐	☐
67 School Bus - Contact Vehicle *	☐	☐
68 School Bus - Noncontact Vehicle *	☐	☐

ROADWAY INFO.	
69 Road Feature	7
70 Road Character	3
71 Road Classification	5
72 Road Surface Type	3
73 Road Configuration	3
74 Access Control	1
75 Number of Lanes	2
76 Traffic Control Type	0
77 Traffic Control Oper	

WORK ZONE RELATED	
78 Workzone Area	5
79 Work Activity	
80 Work Area Marked	
81 Crash Location	

TRAILER INFO.	Unit 1	Unit
82 Trailer Type	00	
1st Trailer No. Axles		
Width (inches)		
Length (feet)		
2nd Trailer No. Axles		
Width (inches)		
Length (feet)		
83 Unit Overwidth Trailer and Overwidth Mobile Home	Overwidth Permit #	

COMMERCIAL VEHICLE: Hazardous Materials Involvement

Haz Mat Placard ☐ Yes ☐ No

Hazardous Cargo ☐ Yes ☐ No

Released (does not include fuel from fuel tank)

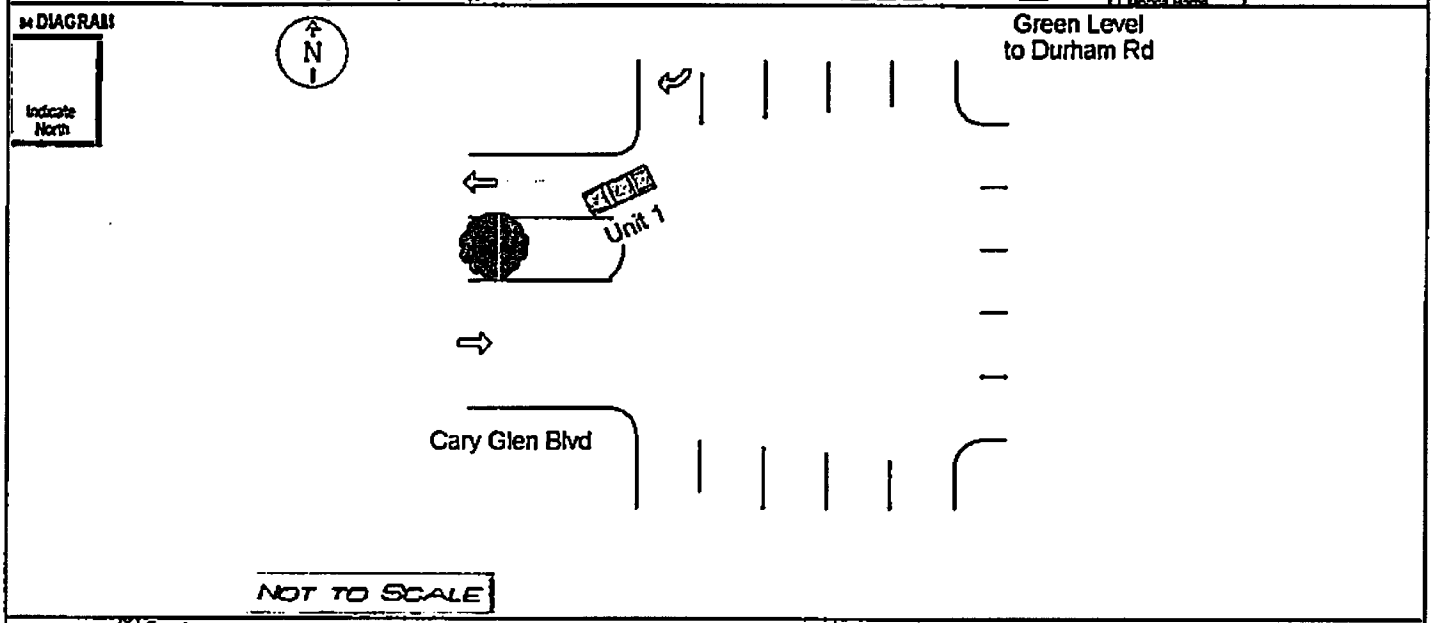
Carrying Haz Mat ☐ Yes ☐ No

From Placard indicates: ◇

4-digit placard number or name from diamond or box — — — —

1-digit number from bottom of diamond —

84 DIAGRAM



Units 1 was: (X) Traveling ☐ Parked Facing ☐N ☐S ☐E ☐W on CARY GLEN BLVD

Unit ___ was: ☐ Traveling ☐ Parked Facing ☐N ☐S ☐E ☐W on ___

85 NARRATIVE (Include pertinent and unusual aspects, which are not listed elsewhere on the form)

UNIT #1 WAS MAKING A RIGHT TURN AND STRUCK THE TRAFFIC ISLAND ON CARY GLEN BLVD CAUSING DAMAGE TO THE FRONT LEFT CORNER OF THE VEHICLE. NOTE: DRIVER #1 STATED HE RECENTLY HAD WORK DONE TO THE FRONT OF HIS VEHICLE AND FEELS THE ACCIDENT WAS CAUSED BY FAULTY WORK BY THE MECHANIC. DRIVER'S #1'S STATEMENT IS BEYOND THE SCOPE OF THIS REPORT AND CANNOT BE SUPPORTED OR REFUTED.

86 Type/Owner ___ Owner Address ___ Phone ___

ADDITIONAL PROPERTY DAMAGE ___ State Property? ☐ Estimated Damage $ ___

WITNESSES

Name ___ Address ___ Phone No. ( ) ___

Name ___ Address ___ Phone No. ( ) ___

TRAFFIC VIOLATION(S)

Name ___ Charge(s) ___ (Citation # optional)

Name ___ Charge(s) ___

Officer Name	Officer Number	Department	Date of Report
robin edwards	5896	Cary Police Department	10/19/2007

Policy No. #3

Amica

Rec'd 2/25/08 JB

30036-6

AUTOMOBILE ACCIDENT REPORT

Complete this report as fully as possible and forward to the Corporate Office or Branch Office in your area.
If extremely serious, telephone in addition to written notice —

THE INSURED'S AUTOMOBILE

License Plate No. [redacted] State NC
Car Ident. No. 1G2ZG528354 [redacted]
Make of car Pontiac Year 05
Name and Address of operator
Op. Lic. No. [redacted]
Business address of operator Same

Registered in name of [redacted]
Address of owner [redacted]
Damage
Date of Birth [redacted]

Home Phone [redacted]
Repair cost
Phone No. ([redacted]
Business Ph [redacted]
Permission to use?
Ext.

THE ACCIDENT

Date of accident October 19 2007
Hour 7:55 a.m. p.m.
Street Cary Glen Blvd City Cary State NC
Did police investigate the accident? No What Department?
Describe how accident happened (include weather and road conditions):

Speed of your car 20 miles an hour Speed of other car
In your opinion, what was cause of accident? Steering locked up causing collision with curb

Diagram on reverse side for your use. Continue description there if necessary.

OCCUPANTS OF VEHICLES

Insured's passengers — names and addresses

[redacted]

Other driver

Passengers

Other vehicle — names and addresses

PERSONS INJURED

Names	Address	Injuries
1.		
2.		
3.		
4.		

Where taken Name of physician

DAMAGE TO PROPERTY OF OTHERS

If auto
License Plate No. State
Name and address of owner
Make of car Year Other insurance company
Nature of damage

Estimated cost of repairs

WITNESSES — IMPORTANT

Name and address
Name and address

Date of report February 25, 2008

Signature of operator or policyholder [redacted]

#5

STEP - 3

License Plate Renewal
View Confirmation

Print This Page For Your Records
And Note Your Approval Code and Sequence Number

CONFIRMATION

Thank you for using NCDMV On-Line Services

Customer Name	[redacted]
Address	[redacted]
VIN	1G2ZG528354[redacted]
Title No.	339024050115115
Plate No.	[redacted]
Vehicle Make	PONT
Total Fee	$28.00

Please note: This confirmation is a purchase receipt. It is not a registration document.

Your new registration will be mailed within seven business days.

If you have a question regarding your renewal or do not receive your registration within this time period, please call (919)715-7000 or Contact DMV .

Sun Mar 05 12:22:40 EST 2006

APPROVAL CODE: 071342 **SEQUENCE NUMBER: 000100008959017**

Register Another Vehicle

Return to DMV Online Services

THOMPSON

THOMPSON CADILLAC-PONTIAC-GMC
2600 WAKE FOREST RD. • RALEIGH, NC 27609

www.thompsoncars.com

CUSTOMER NO 026	ADVISOR REGINA WILLIAMS 148	TAG # 3566	INVOICE DATE 04/12/05	INVOICE # PNCS292265
[redacted]	LABOR RATE / PLATE #	MILES 4,613	COLOR LIQUID SILV	STOCK # 29888
RALEIGH, NC [redacted]	YEAR / MAKE / MODEL 05/PONTIAC/G6/4DR SDN		DELIVERY DATE 12/31/04	DELIVERY MILES 10
	VIN # 1 G 2 Z G 5 2 8 3 5 4 [redacted]		SELLING DEALER # 04057	PRODUCTION DATE
	F.T.E. #	P. O. #	IN DATE 04/12/05	
[redacted]	REMARKS			

LABOR & PARTS----------

D#:1:01PNZ [redacted] LUBE:OIL:FILTER:1:UNITS: [redacted] TECH(S):414 [redacted] 10:00
CHANGED OIL & OIL FILTER, LUBED CHASSIS. CKD & ADJ FLUID
LEVELS, BELTS, HOSES, AIR FILTER & TIRE PRESSURES.

PARTS	QTY	FP	NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 1	1		25010792	OIL FLTR 1.836 R	3.74	3.74
JOB # 1	5		12345101B	OIL ENG 8.800	1.10	5.50
				JOB # 1 TOTAL PARTS		9.24
				JOB # 1 TOTAL LABOR & PARTS		19.24

COMMENTS----------
EMPLOYEE

TOTALS----------

GM PARTS INSTALLED CARRY A 12 MONTH, 12,000 MILE PARTS AND LABOR WARRANTY WHICH EVER OCCURS FIRST.

YOU MAY RECIEVE A SURVEY FROM THE MANUFACTURER IN THE NEXT FEW DAYS. IF FOR ANY REASON YOU CANNOT GRADE US "COMPLETELY STAISFIED" PLEASE CONTACT STUART WOOD @ 919-645-2040 OR JOHN REEVES @ 919-645-2039 IN THE SERVICE DEPARTMENT. THANK YOU FOR YOUR BUSINESS.

TOTAL LABOR....	10.00
TOTAL PARTS....	9.24
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	0.00
TOTAL MISC DISC	0.00
TOTAL TAX.....	0.65
TOTAL INVOICE $	**19.89**

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

THE ONLY WARRANTIES, IF ANY APPLYING TO THESE PARTS, AND FOR SERVICES ARE THOSE OFFERED BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THESE PARTS AND/OR SERVICES. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM SELLER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES

SERVICE DIRECT (919) 828-8139
TOLL FREE (800) 543-6537
MAIN (919) 834-0311

CUSTOMER PAYMENT :
( ) CASH ( ) CHECK #
( ) CHARGE ( ) CREDIT CARD

CASHIER..... PAYMENT DATE

CUSTOMER SIGNATURE

Chang # 026 Employee

 CUSTOMER COPY [END OF INVOICE] 12:10pm

MERCHANTS
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

Charge represent cost/profit
to the motor repair facility
isc,shop supply or waste disp

**** I N V O I C E ****

2005 PONTIAC [redacted] G6
License: [redacted] NC
Mileage: 10421
Lug Torque 100
Tire Infl F/R 30 30

ert#

ERCHANTS INC A TIRE KINGDOMCO
ALEIGH DURALEIGH STORE 343
120 DURALEIGH ROAD
19 571-0071
ustomer: 15991765
[redacted]
ALEIGH NC
ome# [redacted] Work#
dd1 Repairs may be authorized by
IN#

Invoice# 82478762 - RI
Order Num 58050501 - WI
Page - 1
Opening Salesperson 02883971
Date/Time In..... 07/28/05 07:11:59
Date/Time Out..... 07/28/05 10:52:44
Ship To:

PO#:

tem Number	Item Description	Qty	Price Each	Extended
A5	5 YR WHEEL ALIGNMENT PROGRAM	1	85.00	85.00
	02884200 HALL, MICHAEL W.			
VAL	XTRA VALUE PACK	1	79.99	79.99
NC	ROTATION NO CHARGE	1		
	ALL WHEEL			
	02884200 HALL, MICHAEL W.			
ASTERCARD	MasterCard			172.29-

HANK YOU FOR YOUR BUSINESS! IF YOU'RE NOT
OMPLETELY SATISFIED, TALK TO THE STORE MANAGER
R CALL (877) 908-3718

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.

_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED [redacted] DATE 07/28/05

I AUTHORI[redacted]ET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.

I DO_____DO NOT_____WANT MY OLD PARTS RETURNED

PROPOSED METHOD OF PAYMENT; CASH____ CHECK____ CREDIT CARD____

I WILL____ WILL NOT____ BE WAITING FOR MY VEHICLE

CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC, SHOP SUPPLY OR WASTE DISP.

PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

Total Charges..	164.99
Total Credits..	.00
Sub-Total.....	164.99
New Tire Fees**	.00
Shop Fees(*)	1.70
All Taxes.....	5.60
Payments.....	172.29-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:02883255

jiffy lube®

Signature

Jiffy Lube # 2741
JIFFY LUBE
1537 HIGHWAY 70 WEST
GARNER, NC 27529
(919) 779-6080

DATE 11/28/05 12:23PM
INVOICE NO. 2741 301393 BAY2
TRANSACTION NO. 0:112800301393
EMPLOYEES RK DSOBK DSOBK
DSOBK OSOBK OSOBK

[redacted]

RALEIGH, NC [redacted]

YEAR 2005
MAKE PONTIAC
MODEL G6
ENGINE 3.5L 6Cyl (8) Fuel Injected [9]

LICENSE PLATE M7A264R
ALTERNATE ID
MILEAGE 16,800

DATE	MILEAGE	SERVICES
11/28/05	16,900	INS

- Change Oil
- Change Oil Filter
- Check Air Filter
- Check Wiper Blades
- Vacuum Floors
- Wash Exterior Windows
- **Additional Services Performed as Needed:**
  - Lubricate Chassis
  - Check Transmission/Transaxle Fluid
  - Check Differential Fluid
  - Check Power Steering Fluid
  - Check Windshield Washer Fluid
  - Check Battery Water
  - Inflate Tires to Proper Pressure

N.C. INSPECTION PURSUED	1.00	23.50
NC EMISSIONS FEE	1.00	6.50
INSPECTION STICKER NUMBER	1.00	0.00
IZ103719	1.00	0.00

GROSS SALES	30.00
NET SALES	30.00
PARTS	0.00
LABOR	30.00
SALES TAX	0.00
TOTAL	30.00
CASH	30.00

QUALITY INSPECTION BY B. KEATHA
THANK YOU FOR HAVE A NICE DAY!!!!
THANK YOU FOR CHOOSING JIFFY LUBE!!

[redacted]

[redacted]

AUTHORIZED & RECEIVED BY

Cardholder acknowledges receipt of goods and/or services in the amount of the total shown hereon and agrees to perform the obligations set forth in the Cardholder's agreement with the issuer.

CUSTOMER

© Jiffy Lube International, Inc.

301393

STATE OF NORTH CAROLINA
VEHICLE INSPECTION RECEIPT/STATEMENT

SAFETY AND EMISSIONS (OBDII)

Sticker Class: IM
Sticker Number: IZ103[illegible]
Date: 11/28/2[illegible]

****
* APPROVAL *
****

Inspection Fee	$23.50
Sticker Fee	$6.50
Window Tinting Fee	$0.00
Total Fees	$30.00

Make: PONT
Year: 2005
Body Style: SEDAN
VIN: 1G2ZG52[illegible] [redacted]
County: WAKE
Sticker Expiration Month Year: 11 / 2006
TIN: 7898673[redacted]

Vehicle Type: Light Duty
Plate Number: [redacted]
Odometer Reading: 16809
Number of Cylinders: 6
Type of Fuel: GASOLINE
Previous Odometer:
Motor Vehicle Dealer Number:

****

Safety Equipment	
Headlights	PASS
Parking Lights	PASS
Tail Lights	PASS
Beam Indicator Light/Switch	PASS
License Plate Light	PASS
Stop Light	PASS
Directional Signals	PASS
Horn	PASS
Windshield Wipers	PASS
Rear View Mirrors	PASS
Foot Brake	PASS
Emergency Brake	PASS
Steering Mechanism	PASS
Tires	PASS
Exhaust System	PASS
Clearance Lights	N/A
Reflectors	N/A
Window Tinting	N/A

Tampering Inspection	
Catalytic Converter	PASS
Air Injection System	N/A
PCV Valve	PASS
Unleaded Gas Restrictor	PASS
Exhaust Gas Recirculation	PASS
Thermostatic Air Control	N/A
Fuel Evaporative Control	PASS
Oxygen Sensor	PASS
Gasoline Tank Cap	PASS

****

* OBDII Test Results *		
* PASS *		
* MIL Bulb Working	Pass	*
* Connector Damage	Pass	*
* Communications Established	Pass	*
* MIL Commanded-On	Pass	*
* Engine RPM at Reading	682	*

****

****

Station Number: 31391
Inspection Class: Emissions

Analyzer Number: EZ214354 Ver. 0512
Receipt/Statement Number: 6123
Waiver Number:

Inspector-Mechanic [signature]
BRIAN KAUFFRA

Owner's Repair Authorization _____

RETAIN THIS COPY FOR YOUR RECORDS

Total Inspection Fee $6.50 (min) - $30.00

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

*Charge represents cost/profit facility
Misc. Shop Supply or Waste disp

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 16595
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 85289465 - RI
Order Num 60779878 - WI
Page - 1
Opening Salesperson 00025427
Date/Time In..... 11/22/05 14:03:04
Date/Time Out..... 11/22/05 15:17:28

MERCHANTS INC A TIRE KINGDOMCO
CARY MAYNARD STORE 324
1400 SE MAYNARD
919 467-3201
Customer: 15991765
[redacted]
RALEIGH NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
OCBNC	PROMOTIONAL OIL CHANGE UP TO 6 QUARTS OIL	1		
Haz-Material Disp Ch	Haz-Material Disp Charge		3.00	3.00
PZ-9A	OIL FILTER PENNZOIL 8860	1		
AQ5W30	5W30 BULK OIL AQ5W30	6		
RNC	ROTATION NO CHARGE ALL WHEEL 02889235 FALKOWSKI, ROMAN	1		
QC	QUICK CHECK	1		
CASH	Cash Payment			3.21-

IF YOU ARE NOT SATISFIED OR HAVE ANY QUESTIONS
PLEASE TALK TO OUR STORE MANAGER. (919)467-3201

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ [redacted].
SIGN [redacted] DATE _____/_____/_____

Total Charges..	3.00
Total Credits..	.00
Sub-Total.....	3.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.21
Payments.....	3.21-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:02884090

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT: CASH____ CHECK____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

* Charge represent cost/profit
to the motor repair facility
misc, shop supply or waste disp

**** I N V O I C E ****

2005 PONTIAC [redacted] 06
License: [redacted] NC
Mileage: 11570
Lug Torque 100
Tire Infl F/R 30 30

Cert#

MERCHANTS INC A TIRE KINGDOMCO
RALEIGH DURALEIGH STORE 343
5120 DURALEIGH ROAD
919 571-0071
Customer: 15991765
[redacted]
RALEIGH NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Invoice# 82959741 - RI
Order Num 58518029 - WI
Page - 1
Opening Salesperson 02883971
Date/Time In..... 08/16/05 06:49:41
Date/Time Out..... 08/16/05 12:01:07
Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
OCBNC	PROMOTIONAL OIL CHANGE UP TO 6 QUARTS OIL	1		
Haz-Material Disp Ch	Haz-Material Disp Charge		3.00	3.00
PZ-9A	OIL FILTER PENNZOIL 8860	1		
AQ5W30	5W30 BULK OIL AQ5W30	6		
MASTERCARD	MasterCard			3.21-

THANK YOU FOR YOUR BUSINESS! IF YOU'RE NOT
COMPLETELY SATISFIED, TALK TO THE STORE MANAGER
OR CALL (877) 908-3718

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED [redacted] DATE 8/16/05

Total Charges..	3.00
Total Credits..	.00
Sub-Total.....	3.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.21
Payments.....	3.21-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:12907168

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____ DO NOT_____ WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT: CASH_____ CHECK_____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC, SHOP SUPPLY OR WASTE DISP.

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

* Charge represent cost/profit
to the motor repair facility
misc,shop supply or waste disp

**** I N V O I C E ****

2005 PONTIAC [redacted] G6
License: [redacted] NC
Mileage: 20712
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 87501558 - RI
Order Num 62937942 - WI
Page - 1
Opening Salesperson 02882986
Date/Time In..... 02/27/06 08:21:40
Date/Time Out..... 02/27/06 11:09:57

MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer# 15991765
[redacted]
ZEBULON NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
WAP	PROGRAM WHEEL ALIGNMENT	1		
	02882372 CHEEK, SHANNON L.			
	02882372 CHEEK, SHANNON L.			

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED [redacted] DATE _____/_____/_____

Total Charges..	
Total Credits..	.00
Sub-Total.....	.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.00
Payments.....	.00
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:02882602

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT, CASH____ CHECK____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC, SHOP SUPPLY OR WASTE DISP
PLEASE SEE REVERSE SIDE FOR WARRANTY TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

WATT

LUG NUTS:
Tightened_____ Rechecked_____
OIL LEVEL:
Verified_____ Rechecked_____
* W O R K O R D E R *

2005 PONTIAC G6
License: [redacted] NC
Mileage: 20712
Lug Torque 100
Tire Infl F/R 30 30

Cert#
MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#:

Order Number - 62937942 - WI
Page - 1
Opening Salesperson 02882986
Date/Time In..... 02/27/06 08:21:40
Proposed Completion. 02/27/06 09:21:00
Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
WAP	PROGRAM WHEEL ALIGNMENT	1		

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO [redacted]
SIGNED [redacted] DATE 2/27/06

Total Charges..	.00
Total Credits..	.00
Sub-Total.....	.00
New Tire Fees**	.00
Shop Fees	.00
All Taxes.....	
Net Amount.....	.00

This is not an Invoice **
Pay from this Form

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____ DO NOT [illegible] WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT. CASH_____ CHECK_____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

MERCHANT'S TIRE & AUTO CENTERS — A TIRE KINGDOM COMPANY | TIRE KINGDOM | NATIONAL TIRE & BATTERY NTB — A TIRE KINGDOM COMPANY

Date	Salesperson #	CUSTOMER REASON FOR BRINGING VEHICLE IN

VALUED CUSTOMER INFORMATION		VEHICLE INFORMATION		
Name		Home Phone	Year 2005	Mileage 20712
Address		Work Phone	Make Pont	Engine Size
City		Time In	Color/Model	Vin #
State	Zip Code	Date/Time Promised	[redacted]	ate Inspection onth

INDICATE PAYMENT METHOD: ☐ STORE CHARGE ☐ CASH ☐ CHECK ☐ VISA ☐ M/C ☐ AMEX ☐ TK OR NTB CC

CURRENT RIDE CONDITIONS		CURRENT BRAKE CONDITIONS	
IS THE STEERING WHEEL STRAIGHT?	Y / N	IS BRAKE LIGHT ON?	Y / N
IS THE VEHICLE PULLING?	Y / N	IS ABS LIGHT ON?	Y / N
RIGHT OR LEFT PULL?	R / L	IS THERE A NOISE WHEN BRAKING?	Y / N
IS VEHICLE VIBRATING?	Y / N	DOES VEHICLE PULL WHEN BRAKING?	Y / N
DURING BRAKING?	Y / N	DOES PEDAL PULSATE?	Y / N
		IS THE BRAKE PEDAL LOW?	Y / N

CURRENT TIRE CONDITIONS

FRT TIRE SIZE: P/XL/LT 215/60/16 PERFORMANCE RATING ____

6 6 6 5 5 5 5 6

RWL

BW

WW

PLY RATING ____

WHEEL LOCK Y/N LOCATION ____

REAR TIRE SIZE: P/XL/LT ___/___/___ PERFORMANCE RATING ____

LF RF LR RR SP

SAVE OLD TIRES Y / N

COMMENTS:

MINIMUM 6 MONTH / 6000 MILE WARRANTY ON ALL PARTS & LABOR UNLESS OTHERWISE SPECIFIED

Quantity	Tires/Parts/Services	Parts	Labor	Total	*S	*R

COURTESY CHECKLIST

ANTI-FREEZE o.k. to ____

	O.K.	*S	*R
MOTOR OIL			
BELTS			
AIR FILTER			
HOSES			
BATTERY CHECK			
HEADLIGHTS			
WIPER BLADES			
	O.K.	*S	*R
SHOCKS			
STRUTS			
LINKAGE			
CV BOOTS			

BRAKE SYSTEM	REQ	SUG	OK	COMMENTS	
FRONT PAD SHOES				SPEC	ACTUAL
REAR PAD SHOES				SPEC	ACTUAL
FRONT ROTORS/DRUMS				SPEC	ACTUAL
REAR ROTORS/DRUMS				SPEC	ACTUAL
HYDRAULICS					
HARDWARE					

PHONE AUTHORIZATION

From: ____

Associate's Initials ____

Date ____ Time ____

ESTIMATE ONLY

I hereby authorize the repair work listed. Tire Kingdom's employees may operate the vehicle for the purpose of testing, inspection or delivery. See reverse side for disclosure of Customer Rights, MAP guidelines and Tire Kingdom's storage and mechanic's lien policy.

Customer Signature ____

Tire Kingdom is not responsible for personal property.

*See reverse for details.

STORE COPY--ATTACH TO STORE INVOICE COPY

Name
Address

Telephone
Vehicle (VIN)
License
Technician
Mileage
Time Printed 2/27/06 9:28 AM

Pontiac : G6 : 2005-06

Current Measurements

Left Front

-0.2° -1.7°
-1.7°
Camber

2.8°
Caster

0.00° 0.20°
0.53°
Toe

Cross Measurements

-1.0° 0.6°
-1.3°
Cross Camber

0.5° 0.5°
0.0°
Cross Caster

0.00° 0.40°
0.66°
Total Toe

Right Front

Camber

2.8°
Caster

0.20° 0.00°
0.13°
Toe

- Excessive Camber could cause shoulder wear.
- Negative Camber could cause road shock or poor ride quality.
- Excessive Toe could cause scuffing or shoulder wear.
- Excessive cross Camber could cause a pull to the right.

Left Rear

-0.3° -1.3°
-1.6°
Camber

0.00° 0.20°
0.30°
Toe

Total Toe

0.00° 0.40°
0.24°
Total Toe

-0.30° 0.30°
0.18°
Thrust Angle

Right Rear

-1.3° -0.3°
-1.1°
Camber

0.20° 0.00°
-0.06°
Toe

- Excessive Camber could cause shoulder wear.
- Excessive Toe could cause scuffing or shoulder wear.

THOMPSON

THOMPSON CADILLAC-PONTIAC-GMC
2600 WAKE FOREST RD. • RALEIGH, NC 27609

www.thompsoncars.com

CUSTOMER NO	ADVISOR	TAG #	INVOICE DATE	INVOICE #
026	BILL BRENNAN 084	5101	05/17/06	PNCS318978

[redacted]
ZEBULON, NC [redacted]

LABOR RATE	PLATE #	MILES	COLOR	STOCK #
		22,965	LIQUID SILV	29888

YEAR / MAKE / MODEL	DELIVERY DATE	DELIVERY MILES
05/PONTIAC/G6/4DR SDN	12/31/04	10

VIN #	SELLING DEALER #	PRODUCTION DATE
1G2ZG52834[redacted]	04057	

FTE #	P O #	R O DATE	
		05/17/06	REPRINT# 1

[redacted]

REMARKS

LABOR & PARTS

J# 1 01PNZ ***LUBE-OIL-FILTER TECH(S):414 WARRANTY
CHANGED OIL & OIL FILTER. LUBED CHASSIS. CKD & ADJ FLUID
LEVELS. BELTS. HOSES. AIR FILTER & TIRE PRESSURES.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 1	1	PK47-5	OIL CHANGE PACKAGE		WARRANTY
JOB # 1	5	5W30	MOTOR OIL 8.800		WARRANTY
JOB # 1	1	25010792	OIL FLTR 1.836 R		WARRANTY
			JOB # 1 TOTAL PARTS		0.00
			JOB # 1 TOTAL LABOR & PARTS		0.00

J# 2 05PNZ ***STEERING-SUSPEN. TECH(S):414 WARRANTY
CUSTOMER STATES CHECK FRONT SUSPENSION PULLS TO THE RIGHT
CONSTANTLY...
HAS SPECS FROM ALIGNMENT...SOMETHING WRONG WITH SUSPENSION??
ADVISE SEE BODY SHOP

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
			JOB # 2 TOTAL PARTS		0.00
			JOB # 2 TOTAL LABOR & PARTS		0.00

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # 1	OLCP	CUSTOMER COPAYMENT.	318978	10.65
			TOTAL - MISC	10.65

COMMENTS
DROP

TOTALS

GH PARTS INSTALLED CARRY A 12 MONTH. 12.000 MILE PARTS AND LABOR WARRANTY WHICH EVER OCCURS FIRST.

YOU MAY RECIEVE A SURVEY FROM THE MANUFACTURER IN THE NEXT FEW DAYS. IF FOR ANY REASON YOU CANNOT GRADE US "COMPLETELY STAISFIED" PLEASE CONTACT STUART WOOD @ 919-645-2040 OR JOHN REEVES @ 919-645-2039 IN THE SERVICE DEPARTMENT. THANK YOU FOR YOUR BUSINESS.

TOTAL LABOR....	0.00
TOTAL PARTS....	0.00
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	10.65
TOTAL MISC DISC	0.00
TOTAL TAX.....	0.00
TOTAL INVOICE $	**10.65**

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

SERVICE DIRECT (919) 828-8139
TOLL FREE (800) 543-6537
MAIN (919) 834-0311

CUSTOMER PAYMENT :
( ) CASH ( ) CHECK #
( ) CHARGE ( ) CREDIT CARD
[redacted] TE 5/17/06
CUSTOMER SIGNATURE

CUSTOMER COPY

| END OF INVOICE | 08:38am

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

* Charge represent cost/profit
to the motor repair facility
misc,shop supply or waste disp

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 25197
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 90730041 - RI
Order Num 66084702 - WI
Page - 1
Opening Salesperson 12927748
Date/Time In..... 07/08/06 11:13:07
Date/Time Out..... 07/08/06 14:50:37

MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
*** Receive coupon for $10 off your next oil change ****				
How did we do? Please complete the survey at WWW.TKCARES.COM				
***** Password needed for survey is 66084702 00001 *****				
WAP	PROGRAM WHEEL ALIGNMENT	1		
	02873850 CARLTON, STEPHEN M.			
RNC	ROTATION NO CHARGE ALL WHEEL	1		
	02873850 CARLTON, STEPHEN M.			
CLEAN BRAKE DUST OFF INSIDE OF WHEELS IF POSSIBLE.				
	02873850 CARLTON, STEPHEN M.			
CLEAN BRAKE DUST OFF INSIDE OF WHEELS IF POSSIBLE.				

IF YOU HAVE A QUESTION OR CONCERN PLEASE TALK TO
OUR MANAGER. IF THE ISSUE IS STILL NOT RESOLVED,
PLEASE CALL US AT (877) 908-3718

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.
SIGNE[redacted] DATE _____/_____/_____

Special Credit:	
Total Charges..	
Total Credits..	.00
Sub-Total.....	.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.00
Payments.....	.00
Net Amount.....	.00

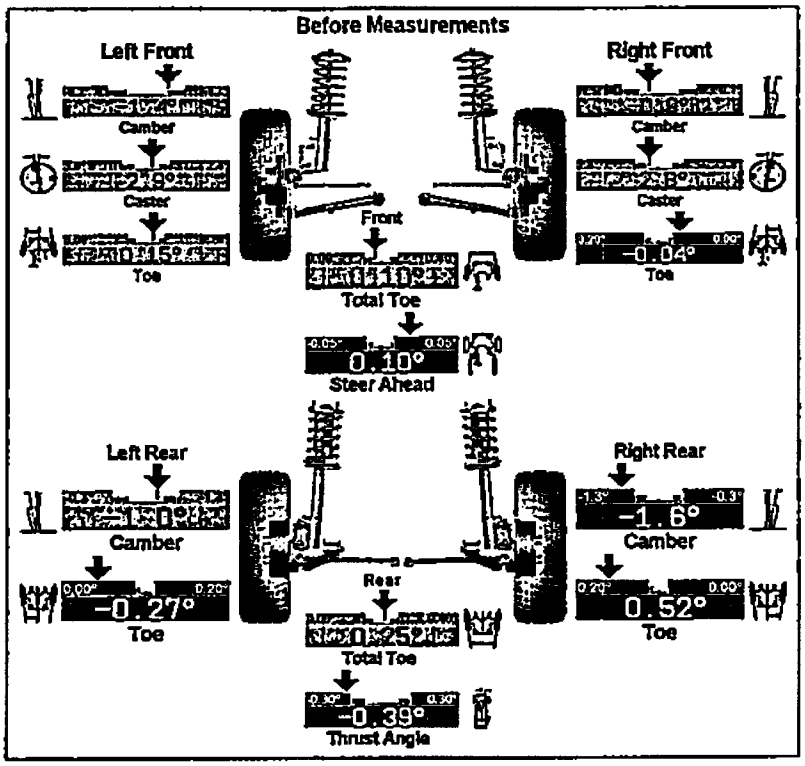
PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:12912295

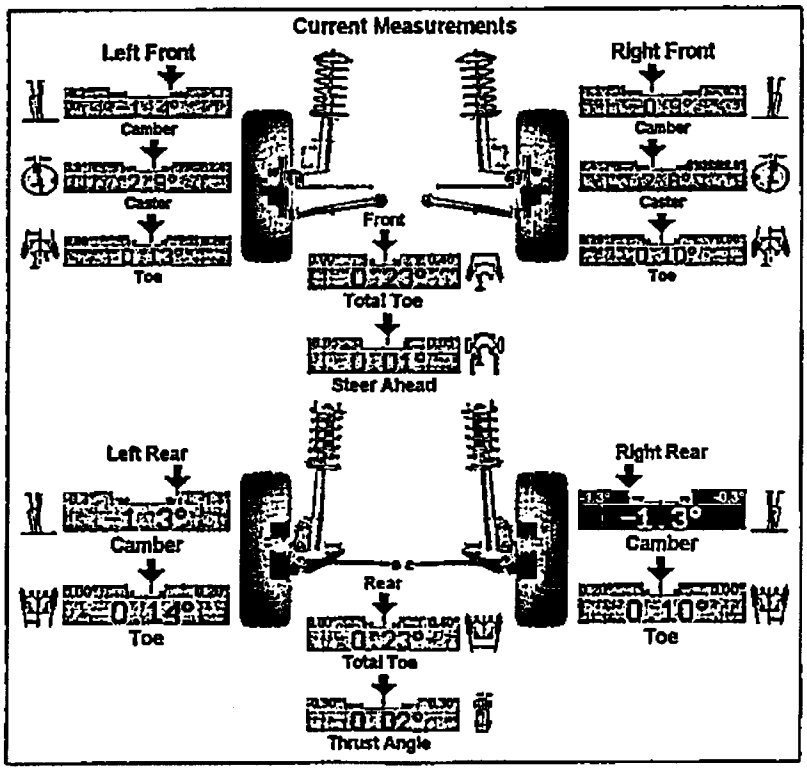
I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT: CASH_____ CHECK_____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC, SHOP SUPPLY OR WASTE DISP.

Name
Address

Telephone
Vehicle (VIN)
License
Technician
Mileage
Time Printed 7/8/06 2:32 PM

Pontiac : G6 : 2005-06





MERCHANT'S TIRE & AUTO CENTERS — A TIRE KINGDOM COMPANY
TIRE KINGDOM
NATIONAL TIRE & BATTERY NTB — A TIRE KINGDOM COMPANY

Date	Salesperson #	CUSTOMER REASON FOR BRINGING VEHICLE IN
		WAP, RNC clean is sick of wheels

VALUED CUSTOMER INFORMATION

Name	[redacted]	
Address		
City		
State	Zip Code	

VEHICLE INFORMATION

Year		Mileage 25197	
Make		Engine Size	
Time In	Color/Model	Vin #	
Date/Time Promised	Tag #	State Inspection Month	

INDICATE PAYMENT METHOD: ☐ STORE CHARGE ☐ CASH ☐ CHECK ☐ VISA ☐ M/C ☐ AMEX ☐ TK OR NTB CC

CURRENT RIDE CONDITIONS

IS THE STEERING WHEEL STRAIGHT?	Y / N
IS THE VEHICLE PULLING?	Y / N
RIGHT OR LEFT PULL?	R / L
IS VEHICLE VIBRATING?	Y / N
DURING BRAKING?	Y / N

CURRENT BRAKE CONDITIONS

IS BRAKE LIGHT ON?	Y / N
IS ABS LIGHT ON?	Y / N
IS THERE A NOISE WHEN BRAKING?	Y / N
DOES VEHICLE PULL WHEN BRAKING?	Y / N
DOES PEDAL PULSATE?	Y / N
IS THE BRAKE PEDAL LOW?	Y / N

CURRENT TIRE CONDITIONS

FRT TIRE SIZE: P/XL/T 215 / 60 / 16 PERFORMANCE RATING ____

32 32 32 32 Outside Positioning — 32 32 32 32 Outside Positioning

RWL

PLY RATING ____

BW

WHEEL LOCK Y/N LOCATION ____

WW

REAR TIRE SIZE: P/XL/T ____ / ____ / ____ PERFORMANCE RATING ____

LF RF LR RR SP

SAVE OLD TIRES Y / N

COMMENTS:

MINIMUM 6 MONTH / 6000 MILE WARRANTY ON ALL PARTS & LABOR UNLESS OTHERWISE SPECIFIED

Quantity	Tires/Parts/Services	Parts	Labor	Total	*S	*R
2	Tiger Paw					
	Touring SR					
0.5	clean wheels					

COURTESY CHECKLIST

ANTI-FREEZE o.k. to ____

	O.K.	*S	*R
MOTOR OIL			
BELTS			
AIR FILTER			
HOSES			
BATTERY CHECK			
HEADLIGHTS			
WIPER BLADES			
	O.K.	*S	*R
SHOCKS			
STRUTS			
LINKAGE			
CV BOOTS			

BRAKE SYSTEM	REQ	SUG	OK	COMMENTS	
FRONT PAD SHOES				SPEC	ACTUAL
REAR PAD SHOES				SPEC	ACTUAL
FRONT ROTORS/DRUMS				SPEC	ACTUAL
REAR ROTORS/DRUMS				SPEC	ACTUAL
HYDRAULICS					
HARDWARE					

PHONE AUTHORIZATION

From: ____

Associate's Initials ____

Date ____ Time ____

ESTIMATE ONLY

I hereby authorize the repair work listed. Tire Kingdom's employees may operate the vehicle for the purpose of testing, inspection or delivery. See reverse side for disclosure of Customer Rights, MAP guidelines and Tire Kingdom's storage and mechanic's lien policy.

Customer Signature ____

Tire Kingdom is not responsible for personal property.

*See reverse for details.

STORE COPY–ATTACH TO STORE INVOICE COPY

08/14/2006 at 02:50 PM Job Number: 90142

BERYL ROAD AUTOMOTIVE & COLLISION
3800 Beryl Road
Raleigh, NC 27607
(919)821-7226 Fax: (919)833-4721

PRELIMINARY ESTIMATE

Written By: Cheryl vanhorn
Adjuster:

Insured [redacted]
Owner [redacted]
Address [redacted]
Knightdale, NC [redacted]
Cellular: [redacted]

Claim #
Policy #
Deductible:
Date of Loss:
Type of Loss:
Point of Impact:

Inspect Location:

Insurance Company:

Days to Repair

2005 PONT G6 6-3.5L-FI 4D SED Int:
VIN: 1G2ZG528354[redacted] **Lic:** mza-2648 NC **Prod Date:** **Odometer:**

Air Conditioning	Rear Defogger	Tilt Wheel
Cruise Control	Intermittent Wipers	Keyless Entry
Body Side Moldings	Dual Mirrors	Fog Lamps
Clear Coat Paint	Power Steering	Power Brakes
Power Windows	Power Locks	Power Mirrors
Power Trunk/Tailgate	AM Radio	FM Radio
Stereo	Search/Seek	CD Player
Driver Air Bag	Passenger Air Bag	4 Wheel Disc Brakes
Cloth Seats	Bucket Seats	Recline/Lounge Seats
Automatic Transmission	Overdrive	

Not an accident door fordings repairs $70.21 See receipt attached

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		TRUNK LID				
2*	Rpr	Trunk lid			2.0	2.3
3		Add for Clear Coat				0.9
4		REAR BUMPER				
5*	Repl	Lower cover retainer (28.00)	1	2.13	0.3	
6		FENDER				
7*	Rpr	RT Fender			2.0	1.8
8		Overlap Major Non-Adj. Panel				-0.2
9		Add for Clear Coat				0.3
10		REAR DOOR				
11*	Repl	RT Handle base ← order for Later	1	28.26	0.5	
12*	Rpr	LT Outer panel installment (48.26)			1.0	0.0
13		FRONT DOOR				
14*	Rpr	LT Outer panel			0.5	0.0
15		HOOD				

08/14/2006 at 02:50 PM Job Number: 90142

PRELIMINARY ESTIMATE

2005 PONT G6 6-3.5L-FI 4D SED Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
16*	Rpr	Hood			0.5	0.0
		Subtotals ==>		30.38	6.8	5.1

Parts		30.38
Body Labor	6.8 hrs @ $ 40.00/hr	272.00
Paint Labor	5.1 hrs @ $ 40.00/hr	204.00
Paint Supplies	5.1 hrs @ $ 30.00/hr	153.00
SUBTOTAL		$ 659.38
Sales Tax	$ 30.38 @ 7.0000%	2.13
GRAND TOTAL		$ 661.51

This estimate is based on our inspection and does not cover additional items that may be required to complete repair. Sometimes, after work begins, worn or damaged parts are discovered that are not evident on the first inspection. Naturally, this estimate cannot cover such contingencies. Part prices are current and subject to invoice.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide DR1FQ05 Database Date 07/2006, CCC Data Date 07/2006, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) parts are OEM parts that may be provided by or through alternate sources other than the OE/Vehicle dealerships. OPT OEM parts may reflect some specific, special, or unique pricing or discount. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recon. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2006 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

CCC Pathways - A product of CCC Information Services Inc.

BERYL ROAD AUTOMOTIV
COLLISION
3800 BERYL RD
RALEIGH NC 27607
919-821-7226

BATCH: 107
S-A-L-E-S D-R-A-F-T
72572182
6800818125361111

REF: 0002
CD TYPE: MASTERCARD
TR TYPE: PURCHASE
DATE: SEP 01, 06 16:02:47

TOTAL $70.21

ACCT: 5201 EXP: **/**
AP: 074164
NAME: [redacted]

CARDMEMBER ACKNOWLEDGES RECEIPT OF GOODS AND/OR SERVICES IN THE AMOUNT OF THE TOTAL SHOWN HEREON AND AGREES TO PERFORM THE OBLIGATIONS SET FORTH BY THE CARDMEMBER'S AGREEMENT WITH THE ISSUER

THANK YOU

[redacted]

TOP COPY-MERCHANT BOTTOM COPY-CUSTOMER

MERCHANT'S
TIRE & AUTO CENTERS

COMMERCIAL | Tire Kingdom, INC.
CUSTOMERS | PO Box 116992
REMIT TO: | ATLANTA, GA30368-6992

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 30768
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 92648409 - RI
Order Num 67964869 - WI
Page - 1
Opening Salesperson 12929600
Date/Time In..... 09/22/06 10:12:30
Date/Time Out..... 09/22/06 11:02:49

MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC[redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
OCBNC	PROMOTIONAL OIL CHANGE UP TO 6 QUARTS OIL	1		
Haz-Material Disp Ch	Haz-Material Disp Charge		3.00	3.00
PZ-9A	OIL FILTER PENNZOIL 8860	1		
AQ5W30	5W30 BULK OIL AQ5W30	6		
WAP	PROGRAM WHEEL ALIGNMENT 12921291 GREEN, TOM E.	1		
BCA	BRAKES CHECK & ADVISE	1		
CUSTOMER SAYS THE BRAKES SQWEEK SOMETIMES				
MASTERCARD	MasterCard			3.21-

IF YOU HAVE A QUESTION OR CONCERN PLEASE TALK TO
OUR STORE MANAGER, DANNY S. HONEYCUTT
AT (919) 779-7004

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.

_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNED[redacted]_____ DATE _____/_____/_____

Special Credit:	
Total Charges..	3.00
Total Credits..	.00
Sub-Total.....	3.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.21
Payments.....	3.21-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:12929600

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT: CASH_____ CHECK_____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

MERCHANT'S
TIRE & AUTO CENTERS

Waiting

LUG NUTS:
Tightened_____ Rechecked_____
OIL LEVEL:
Verified 29/2 Rechecked_____

2005 PONTIAC G6
License: MZA2648 NC
Mileage: 30768
Lug Torque 100
Tire Infl F/R 30 30

Cert#
MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#:

Order Number - 67964869 - WI
Page - 1
Opening Salesperson 12929600
Date/Time In..... 09/22/06 10:12:30
Proposed Completion. 09/22/06 11:12:00
Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
OCBNC	PROMOTIONAL OIL CHANGE UP TO 6 QUARTS OIL	1		
Haz-Material Disp Ch	Haz-Material Disp Charge		3.00	3.00
FILTER	SELECT(R) OIL FILTER FILTER	1		
OIL	SELECT(R) OIL	6		
WAP	PROGRAM WHEEL ALIGNMENT	1		
BCA	BRAKES CHECK & ADVISE	1		

CUSTOMER SAYS THE BRAKES SQWEEK SOMETIMES

P79A

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
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_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE.

SIGNE[redacted] DATE ____/____/____

I AUTHO[redacted]ET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT. CASH____ CHECK____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC, SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

Special Credit:	
Total Charges..	3.00
Total Credits..	.00
Sub-Total.....	3.00
New Tire Fees**	.00
Shop Fees	.00
All Taxes.....	.21
Net Amount.....	3.21

** not an Invoice **
Do Not Pay from this Form

MERCHANT'S
TIRE & AUTO CENTERS
A TIRE KINGDOM COMPANY

Minimum 6 month/ 6000 mile warranty on all parts and labor unless otherwise specified.

Intended Payment Method:
Store Charge ☐ CASH ☐ CHECK ☐ VISA ☐ MC ☐ AMEX ☐

Salesperson #	Vin #	Mont. Co. Reg. No. 654	Date	Work Order #	
Name		Home Phone	Tag #	State Inspection Month	Vehicle Color
Address		Work Phone	Make	Mileage	
City		Time In	Model	Engine Size 3.5	
State		Date/Time Promised	Year	Technician	

Tires
Brand
Type
Size
Tread Depth

LF	/32"	RF	/32"
LR	/32"	RR	/32"

	O.K.	*S	*R
SHOCKS			
STRUTS			
LINKAGE			
CV BOOTS			

BRAKE SYSTEM	REQ	SUG	OK	COMMENTS	
FRONT PAD SHOES				SPEC	ACTUAL
REAR PAD SHOES				SPEC	ACTUAL
FRONT ROTORS/DRUMS				SPEC	ACTUAL
REAR ROTORS/DRUMS				SPEC	ACTUAL
HYDRAULICS					
HARDWARE					

COURTESY CHECKLIST
ANTI-FREEZE o.k. to

	O.K.	*S	*R
MOTOR OIL			
BELTS			
HOSES			
BATTERY CHECK			
HEADLIGHTS			
WIPER BLADES			

Transmission Production Date
Automatic ☐ Manual ☐ Front Wheel Drive ☐ Rear Wheel Drive ☐ 4-Wheel Drive ☐

Quantity	Tires/Parts/Services	Parts	Labor	Total	*S	*R
1	Machine Ft Rotors			85.00		
	Warped/Vibration					
2	Tires 215/60/16	68.99 x2	11.25 x2	166.48		
	Clean Worn out	x4	x4	366.04		
1	30K			399.99		

WHEELS TIGHT! Technician's Initials

CHECKED OIL Technician's Initials

PHONE AUTHORIZATION
From:
Associate's Initials
Date Time

ESTIMATE ONLY

I hereby authorize the repair work listed. Merchant's employees may operate the vehicle for the purpose of testing, inspection or delivery. See reverse side for disclosure of Customer Rights, MAP guidelines and Merchant's storage and mechanic's lien policy.

Customer Signature
Merchant's is not responsible for personal property.
*See reverse for details.

USED PARTS DISPOSAL
☐ Return my used parts
☐ Do NOT return used parts
Customer must select one & sign
NOTE: Work cannot begin without customer signuature.

Address

Telephone

Vehicle (VIN)

License

Technician

Mileage

Time Printed 9/22/06 10:40 AM

Pontiac : G6 : 2005-06

	Front : Left			Front : Right		
	Actual	Before	Specified Range	Actual	Before	Specified Range
Camber	-1.4°	-1.4°	-1.7° -0.2°	-0.9°	-0.9°	-1.5° 0.1°
Caster	2.7°	2.7°	2.4° 3.9°	2.9°	2.9°	2.4° 3.9°
Toe	0.11°	0.12°	0.00° 0.20°	0.10°	0.11°	0.00° 0.20°
SAI	12.6°	12.6°		13.3°	13.3°	
Included Angle	11.2°	11.2°		12.4°	12.4°	
Turning Angle Diff.						

	Front		
	Actual	Before	Specified Range
Cross Camber	-0.4°	-0.5°	-1.0° 0.6°
Cross Caster	-0.1°	-0.1°	-0.8° 0.8°
Cross SAI	-0.7°	-0.7°	
Total Toe	0.21°	0.23°	0.00° 0.40°
Cross Turn Diff.			

	Rear : Left			Rear : Right		
	Actual	Before	Specified Range	Actual	Before	Specified Range
Camber	-1.3°*	-1.3°	-1.3° -0.3°	-1.1°	-1.2°	-1.3° -0.3°
Toe	0.13°	0.20°	0.00° 0.20°	0.12°	-0.04°*	0.00° 0.20°

	Rear		
	Actual	Before	Specified Range
Cross Camber	-0.2°	-0.1°	
Total Toe	0.25°	0.16°	0.00° 0.40°
Thrust Angle	0.01°	0.12°	-0.30° 0.30°

* This value is not within specification. Tire wear, handling and safety problems may result.

MERCHANT'S
TIRE & AUTO CENTERS

COMMERCIAL Tire Kingdom, INC.
CUSTOMERS PO Box 116992
REMIT TO: ATLANTA, GA30368-6992

**** I N V O I C E ****

2005 PONTIAC G6
License: MZA2648 NC
Mileage: 31576
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 92956680 - RI
Order Num 68258350 - WI
Page - 1
Opening Salesperson 12927748
Date/Time In..... 10/04/06 10:13:50
Date/Time Out..... 10/04/06 16:32:25

MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
*** Receive coupon for $10 off your next oil change ****				
How did we do? Please complete the survey at WWW.TKCARES.COM				
***** Password needed for survey is 68258350 00001 *****				
BRLAB	/10TH HOUR BRAKE LABOR	10	8.50	85.00
	02882372 CHEEK, SHANNON L.			
MASTERCARD	MasterCard			93.50-

IF YOU HAVE A QUESTION OR CONCERN PLEASE TALK TO
OUR STORE MANAGER,
AT (919) 779-7004

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.

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_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE

SIGNED [redacted] DATE ____/____/____

Special Credit:	
Total Charges..	85.00
Total Credits..	.00
Sub-Total.....	85.00
New Tire Fees**	.00
Shop Fees(*)	8.50
All Taxes.....	.00
Payments.....	93.50-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:12929600

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT: CASH____ CHECK____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

MERCHANT'S
TIRE & AUTO CENTERS

WAIT

LUG NUTS:
Tightened 82 Rechecked_____
OIL LEVEL: 2372
Verified_____ Rechecked_____

2005 PONTIAC G6
License: MZA2648 NC
Mileage: 31576
Lug Torque 100
Tire Infl F/R 30 30

Cert#
MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
ZEBULON NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#:

Order Number - 68258350 - WI
Page - 1
Opening Salesperson 12927748
Date/Time In..... 10/04/06 10:13:50
Proposed Completion. 10/04/06 11:13:00
Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
BRLAB	/10TH HOUR BRAKE LABOR	10	8.50	85.00
MACHINE FRONT ROTORS				

2882372

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
_____ I REQUEST A WRITTEN ESTIMATE.
_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ I [redacted]IMATE.
SIGNE[redacted]____ DATE 10 / 4 / 06

Special Credit:	
Total Charges..	85.00
Total Credits..	.00
Sub-Total.....	85.00
New Tire Fees**	.00
Shop Fees	8.50
All Taxes.....	
Net Amount.....	93.50

This is not an Invoice **
Do Not Pay from this Form

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT; CASH____ CHECK____ CREDIT CARD_____
I WILL_____ WILL NOT_____ BE WAITING FOR MY VEHICLE
*CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

MERCHANT'S TIRE & AUTO CENTERS — A TIRE KINGDOM COMPANY | TIRE KINGDOM | NATIONAL TIRE & BATTERY NTB — A TIRE KINGDOM COMPANY

Date	Salesperson #	CUSTOMER REASON FOR BRINGING VEHICLE IN
		Machine Ft Rotors

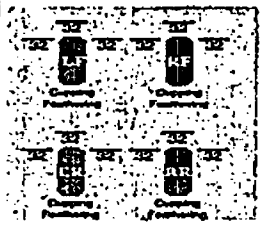
VALUED CUSTOMER INFORMATION		VEHICLE INFORMATION		
Name		Home Phone [redacted]	Year 2005	Mileage 31576
Address		Work Phone	Make Pontiac	Engine Size
City		Time In	Color/Model G6	Vin #
State	Zip Code	Date/Time Promised	Tag #	State Inspection Month

INDICATE PAYMENT METHOD: ☐ STORE CHARGE ☐ CASH ☐ CHECK ☐ VISA ☐ M/C ☐ AMEX ☐ TK OR NTB CC

CURRENT RIDE CONDITIONS		CURRENT BRAKE CONDITIONS	
IS THE STEERING WHEEL STRAIGHT?	Y / N	IS BRAKE LIGHT ON?	Y / N
IS THE VEHICLE PULLING?	Y / N	IS ABS LIGHT ON?	Y / N
RIGHT OR LEFT PULL?	R / L	IS THERE A NOISE WHEN BRAKING?	Y / N
IS VEHICLE VIBRATING?	Y / N	DOES VEHICLE PULL WHEN BRAKING?	Y / N
DURING BRAKING?	Y / N	DOES PEDAL PULSATE?	Y / N
		IS THE BRAKE PEDAL LOW?	Y / N

CURRENT TIRE CONDITIONS

FRT TIRE SIZE: P/O/LT 215 / 60 / 16 PERFORMANCE RATING ____



RWL

BW

WW

PLY RATING ____

WHEEL LOCK Y/N LOCATION ____

REAR TIRE SIZE: P/O/LT ____ / ____ / ____ PERFORMANCE RATING ____

LF RF LR RR SP

SAVE OLD TIRES Y / N

COMMENTS:

MINIMUM 6 MONTH / 6000 MILE WARRANTY ON ALL PARTS & LABOR UNLESS OTHERWISE SPECIFIED

Quantity	Tires/Parts/Services	Parts	Labor	Total	*S	*R
4	Tires					
	Check alignment					

COURTESY CHECKLIST

ANTI-FREEZE o.k. to ____

	O.K.	*S	*R
MOTOR OIL			
BELTS			
AIR FILTER			
HOSES			
BATTERY CHECK			
HEADLIGHTS			
WIPER BLADES			
	O.K.	*S	*R
SHOCKS			
STRUTS			
LINKAGE			
CV BOOTS			

BRAKE SYSTEM	REQ	SUG	OK	COMMENTS	
FRONT PAD SHOES				SPEC	ACTUAL
REAR PAD SHOES				SPEC	ACTUAL
FRONT ROTORS/DRUMS				SPEC	ACTUAL
REAR ROTORS/DRUMS				SPEC	ACTUAL
HYDRAULICS					
HARDWARE					

PHONE AUTHORIZATION

From: ____

Associate's Initials ____

Date ____ Time ____

ESTIMATE ONLY

I hereby authorize the repair work listed. Tire Kingdom's employees may operate the vehicle for the purpose of testing, inspection or delivery. See reverse side for disclosure of Customer Rights, MAP guidelines and Tire Kingdom's storage and mechanic's lien policy.

Customer Signature ____

Tire Kingdom is not responsible for personal property.

*See reverse for details.

STORE COPY-ATTACH TO STORE INVOICE COPY

1401 NEW

1-6861

[redacted]

	CHARGE	
46	75-DL DURAMAST	
#2 46	CORE CHARGE	
#24 149	BTH BATTERY TER	
	SUBTOTAL	71.18
	TOTAL TAX @ 7.50%	4.80
		75.98
	VISA	75.98
	APPROVAL #	088522

REG #02 CSR #01 RECEIPT #041738
STR. TRANS #578023
STORE #1095
DATE 07/17/2007 09:26

OF ITEMS SOLD 2

Loyalty Card Customer:
[redacted]
Credits Towards Next Reward: 1
Total Rewards Earned : 0.00
Total Rewards Spent : 0.00
Current Rewards Balance : 0.00
Loyalty Card Plan:
5 Transactions/$20=$20 Reward

919) 696 - 2381

2005 Pontiac G6
Item: 232746 75-DLG DURAMAST GOLD BA
8 YEAR/96 MONTH WARRANTY ON ABOVE ITEM
36 MONTHS FREE REPLACEMENT PERIOD

Battery Limited Warranty
This warranty lasts from the day you buy the battery to the end of the warranty period on this receipt. This warranty expires when you sell or transfer your vehicle. If the battery is found defective during the free replace-

MERCHANT'S®
TIRE & AUTO CENTERS

COMMERCIAL|Tire Kingdom, INC.
CUSTOMERS |PO Box 406010
REMIT TO:|ATLANTA,GA30384-6010

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 558 8
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 14984360 - RI
Order Num 77501947 - WI
Page - 1
Opening Salesperson 12919995
Date/Time In..... 10/12/07 8:38:
Date/Time Out..... 10/12/07 7:28:

MERCHANTS INC A TIRE KINGDOMCO
CARY PARKWAY STORE 327
100 TOWN VILLAGE DRIVE
919 380-2980
Customer: 15991765

Ship To:

[redacted]
KNIGHTDALE NC
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN# PO#:

Item Number	Item Description	Qty	Price Each	Extended
NET089	OIL CHG BULK OIL COUPON UP TO 6 QUARTS OIL	1	6.99	16 99
PZ-9A	OIL FILTER PENNZOIL 8860	1		
AQ5W30	5W30 BULK OIL AQ5W30	6		
OILLAB-K	/10TH HOUR LABOR	1		
BCA	BRAKES CHECK & ADVISE	1		
WAP	PROGRAM WHEEL ALIGNMENT	1		
	12935577 WALKER, SAMUEL A.			
VALUE	VALUE-STOP FRT BRAKE SERVICE	1		
	12935577 WALKER, SAMUEL A.			
VALUEW	PTS 1 X FREE LBR 12MO/12K MIL	1		
XPBR-K	FRONT BRAKE PADS OUTSIDE PURCHASE BRAKE New	1	96.42	96 42
	12935577 WALKER, SAMUEL A.			

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $100.
___ I REQUEST A WRITTEN ESTIMATE.
___ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $ _____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
___ I DO NOT REQUEST A WRITTEN ESTIMATE

SIGNED _____ DATE ___/___/___

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. TIRE KINGDOM USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO _____ DO NOT _____ WANT MY PARTS RETURNED

PROPOSED METHOD OF PAYMENT, CASH ___ CHECK ___ CREDIT CARD ___
CHARGES REPRESENT COST/PROFIT TO THE VEHICLE REPAIR FACILITY, MISC. SHOP SUPPLY OR WASTE DISPOSAL
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION CUSTOMER COPY

MERCHANT'S®
TIRE & AUTO CENTERS

COMMERCIAL | Tire Kingdom, INC.
CUSTOMERS | PO Box 406010
REMIT TO: | ATLANTA, GA30384-6010

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 558[illegible]8
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 14984360 - R1
Order Num 77501947 - W1
Page - 2
Opening Salesperson 1[illegible]919995
Date/Time In..... 1[illegible]2/07 [illegible]8:3[illegible]:
Date/Time Out..... 1[illegible]2/07 [illegible]7:2[illegible]:
Ship To:

MERCHANTS INC A TIRE KINGDOMCO
CARY PARKWAY STORE 327
100 TOWN VILLAGE DRIVE
919 380-2980
Customer: 15991765
[redacted]

Home# [redacted] Work#
Addl Repairs may be authorized by
VIN# PO#:

Item Number	Item Description	Qty	Price Each	Extended
KBRLAB	BRAKE PACKAGE LABOR	1	[illegible]3.57	1[illegible] [illegible]7
RSFRCBF	MACH. ROTORs/DRUMS (NON-COMP)	1		
	ANALYZE BRAKE FLUID			
	12935577 WALKER, SAMUEL A.			
RPBEARING	REPACK NON-SEALED BEARING	1		
	SEALS EXTRA			
	12935577 WALKER, SAMUEL A.			
SURERR	REAR SURE-STOP BRAKE SVC	1	[illegible]0.00	2[illegible] [illegible]0-
	12935577 WALKER, SAMUEL A.			
SUREW	PTS LIFETIME LBR 2YR/24K MILE	1		
SUREPAD	PREMIUM DISC BRAKE PADS	1		
XPBR-K	REAR BRAKE PADS	1	[illegible]6.01	9[illegible] 1
	OUTSIDE PURCHASE BRAKE			
	New			
	12935577 WALKER, SAMUEL A.			
KBRLAB	BRAKE PACKAGE LABOR	1	[illegible]3.98	6[illegible] [illegible]8
RSFRCBF	MACH. ROTORs/DRUMS (NON-COMP)	1		
	ANALYZE BRAKE FLUID			
	12935577 WALKER, SAMUEL A.			

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___ I DO NOT REQUEST A WRITTEN ESTIMATE

SIGNED _____ DATE ___/___/___

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. TIRE KINGDOM USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO _____ DO NOT _____ WANT MY PARTS RETURNED

PROPOSED METHOD OF PAYMENT. CASH ___ CHECK ___ CREDIT CARD ___
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PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION CUSTOMER COPY

MERCHANT'S®
TIRE & AUTO CENTERS

COMMERCIAL|Tire Kingdom, INC.
CUSTOMERS |PO Box 406010
REMIT TO:|ATLANTA,GA30384-6010

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 55808
Lug Torque 100
Tire Infl F/R 30 30

Cert#

Invoice# 14984360 - RI
Order Num 77501947 - WI
Page - 3
Opening Salesperson 1.919995
Date/Time In..... 10/12/07 08:39:
Date/Time Out..... 10/12/07 17:29:
Ship To:

MERCHANTS INC A TIRE KINGDOMCO
CARY PARKWAY STORE 327
100 TOWN VILLAGE DRIVE
919 380-2980
Customer: 15991765
[redacted]
KNIGHTDALE NC[redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN# PO#:

Item Number	Item Description	Qty	Price Each	Extended
RPBEARING	REPACK NON-SEALED BEARING SEALS EXTRA 12935577 WALKER, SAMUEL A.	1		
BFBCRBA	INC.BLEED FRONT BRAKES CHECK REAR BRAKE ADJ 12935577 WALKER, SAMUEL A.	1		
XPMP	STUD AND NUT OUTSIDE PURCHASE MECHANIC PART New	1	3.54	1[illegible]4
UHLAB	/10TH HOUR LABOR UNDERHOOD LABOR	2	8.50	1[illegible]0
VISA	Visa CARD NUMBER 5048 APPR 000513			34[illegible]7

IF YOU HAVE A QUESTION OR CONCERN PLEASE TALK TO
OUR STORE MANAGER, NATHAN S. SWOPE
AT (919) 380-2980

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW AND SIGN:
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___ I DO NOT REQUEST A WRITTEN ESTIMATE

SIGNED _____ DATE ___/___/___

Special Credit:	
Total Charges..	31[illegible]1
Total Credits..	2[illegible]0
Sub-Total.....	29[illegible]1
New Tire Fees**	[illegible]0
Shop Fee (*)	[illegible]5
All Taxe.....	[illegible]1
Payments.....	34[illegible]7
Net Amount.....	[illegible]0
PLEASE PAY ABOVE AMOUNT	
THANK YOU! Closer:129	79

I AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. TIRE KINGDOM USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
I DO _____ DO NOT _____ WANT MY PARTS RETURNED

PROPOSED METHOD OF PAYMENT, CASH ___ CHECK ___ CREDIT CARD ___
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PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION CUSTOMER COPY

Merchants Tire

100 Town Village Drive
Cary, N.C. 27513

Phone Number: (919)-380-2980
Fax Number: (919)-380-2983

Customer:		Date:	10/12/2007 4:30 PM
Company:		VIN	
License NO:		Technician:	
Odometer:		Order NO:	

VEHICLE ALIGNMENT REPORT

PONTIAC, 2005, G6

Primary Angles

			Initial	Specifications Min.	Specifications Max.	Final
Front	Caster	Left	3.0°	2.3°	3.8°	2.7°
		Right	3.1°	2.3°	3.8°	2.7°
	Camber	Left	-1.2°	-1.9°	-0.4°	-1.3°
		Right	-1.2°	-1.4°	0.1°	-1.0°
	Toe	Left	0.35°	0.00°	0.20°	0.05°
		Right	0.00°	0.00°	0.20°	0.15°
		Total	0.35°	0.00°	0.40°	0.20°
Rear	Camber	Left	-1.2°	-1.3°	-0.3°	-1.2°
		Right	-1.5°	-1.3°	-0.3°	-1.3°
	Toe	Left	0.10°	0.00°	0.20°	0.10°
		Right	0.05°	0.00°	0.20°	0.10°
		Total	0.15°	0.00°	0.40°	0.20°
	Thrust Angle		0.0°	0.3°		0.0°

Secondary Angles

		Initial	Specifications Min.	Specifications Max.	Final
SAI	Left	11.6°	—	—	11.6°
	Right	13.8°	—	—	13.8°
Included Angle	Left	10.4°	—	—	10.3°
	Right	12.6°	—	—	12.8°
Toe Out On Turns	Left	—	—	—	—
	Right	—	—	—	—
Max Turn Inside	Left	—	—	—	—
	Right	—	—	—	—
Toe Curve Change	Left	—	—	—	—
	Right	—	—	—	—
Setback	Front	-0.0"	—	—	-0.0"
	Rear	-0.1"	—	—	-0.1"
Track Width Diff.		-0.5"			-0.5"
Wheel Base Diff.		0.1"			0.1"
Front Ride Height	Left	—	2.7"	2.7"	—
	Right	—	2.7"	2.7"	—
Rear Ride Height	Left	—	6.7"	6.7"	—
	Right	—	6.7"	6.7"	—
Frame Angle					—

MERCHANT'S TIRE & AUTO CENTERS A Division of TIRE KINGDOM

UNLIMITED MILEAGE WHEEL ALIGNMENT PROGRAMS

Customer Nam[redacted] ore Location #: 3413

Invoice Number: 58050501 Date of Purchase: 3-8-05

Alignment Type: Circle One (1):

Standard Thrust Angle 4 - Wheel

Original Vehicle: Year 2005 Make Pontiac Model G6

Transfer Vehicle: Year Make Model

Check One (1):

☐ 1 YEAR UNLIMITED MILEAGE PROGRAM
Expiration Date:

☐ 3 YEAR UNLIMITED MILEAGE PROGRAM
Expiration Date:

☑ 5 YEAR UNLIMITED MILEAGE PROGRAM
Expiration Date: 3-8-10

- This alignment program not valid unless accompanied by original invoice.
- Valid at all ***TIRE KINGDOM*** retail locations. Appointment may be necessary.
- Call 1-800-NEW TIRE (1-800-639-8473) to be directly connected to the ***TIRE KINGDOM*** location nearest you.

This agreement does not warrant that an alignment will last for any specified amount of time, it is necessary and recommended that you bring the vehicle back to ***TIRE KINGDOM*** to be inspected and/or realigned every 6 months or 6, 000 miles, or whenever needed. This is done to ensure the best possible operation of your vehicle, not to include the replacement of tires or parts which may become worn. Failure to replace worn suspension parts does not void this agreement, however alignment with worn suspension parts may be ineffective in obtaining maximum tire mileage, suspension life, and dependable vehicle operation.

Colony Tire & SERVICE CENTERS

www.colonytire.com

800*22*TIRES

PLEASE REMIT TO: COLONY TIRE CORPORATION P.O. Box 30367 | Charlotte, NC 28230-0367

SOLD TO [redacted] 1/28

ZEBULON NC [redacted]

SHIP TO: SAME

INVOICE# 281339

CUST. PO. #	MAKE-MODEL	TAG	MILEAGE	TELEPHONE	ROUTE	SLM	SHIP VIA	ORDER #	PAGE	REMARKS
	05 GG	[redacted]	35284	[redacted]	0	TE	N/A	12/02/06	1	

INVOICE DATE	INVOICE NUMBER	PREVIOUS SHIPPED INVOICE NUMBER	TERMS	
12/02/2006	281339		CASH SALE	Opened by Operator # 261 12/02/06 14:37:20 281

STOCK NUMBER	SIZE	DESCRIPTION	QUANTITY ORDERS	SHIPPED	PREV. SHIP	UNIT PRICE	T	F.E.T.	EXTENSION	
2005	PONTIAC	G6								
		EMISSION INSPECTION								SERV/MECH
ES	PES	EMISSIONS STICKER		1	1	6.50		.00	6.50	
SI02	LSI	NC STATE INSP/EMISSIONS		1	1	23.50		.00	23.50	86
05835	P215/60R16 94S	NC ALL SEASON IV BLK (45K)		4	4	70.88	06	.00	283.52	
C BAL	LCB	COMPUTER BALANCE		4	4	10.50		.00	42.00	06
VSD	PVS	CHROME VALVE STEM AND TD		4	4	2.99	06	.00	11.96	
0053	DF	2% NC SCRAP TIRE TAX		1	1	5.67		.00	5.67	
9913	RHW	ROAD HAZARD WARRANTY			0	9.99		.00	.00	

****
* We recommend our Free tire *
* rotation every 5,000 miles *
* for the best Mileage & Wear*
****

METHOD OF PAYMENT:
VISA 5049 393.10 EXP: 03/2035 AUTHORIZATION CODE: 074205
CHANGE: .00

WE APPRECIATE YOUR BUSINESS!! COME AGAIN!!

HOW ARE WE DOING? 800-22-TIRES SON McGEHEE

Mech: GIOVANNI AQUILA
ROMAN FALKOWSKI

PARTS	LABOR	TAX %	TAXABLE AMOUNT	TAX	F.E.T.	MISC. AMOUNT	INVOICE TOTAL
307.65	65.50		255.48	19.95			393.10

A FINANCE CHARGE OF 1 1/2% PER MONTH (18% ANNUAL PERCENTAGE RATE) will be charged on all invoices over 30 days past due.

RECEIVED BY

STATE OF NORTH CAROLINA
VEHICLE INSPECTION RECEIPT/STATEMENT

SAFETY AND EMISSIONS (OBDII)

Sticker Class: IM
Sticker Number: IS498884
Date: 12/02/2006

****
* APPROVAL *
****

Inspection Fee	$23.50
Sticker Fee	$6.50
Window Tinting Fee	$0.00
Total Fees	$30.00

Make: PONT
Year: 2005
Body Style: SEDAN
VIN: 1G2ZG528354[redacted]
County: JOHNSTON
Sticker Expiration Month/Year: 11 2007
TIN: 286818683458

Vehicle Type: Light Duty
Plate Number: [redacted]
Odometer Reading: 55284
Number of Cylinders: 6
Type of Fuel: GASOLINE
Previous Odometer:
Motor Vehicle Dealer Number:

****

Safety Equipment

Headlights	PASS
Parking Lights	PASS
Tail Lights	PASS
Beam Indicator Light/Switch	PASS
License Plate Light	PASS
Stop Light	PASS
Directional Signals	PASS
Horn	PASS
Windshield Wipers	PASS
Rear View Mirrors	PASS
Foot Brake	PASS
Emergency Brake	PASS
Steering Mechanism	PASS
Tires	PASS
Exhaust System	PASS
Clearance Lights	N/A
Reflectors	N/A
Window Tinting	N/A

Tampering Inspection

Catalytic Converter	PASS
Air Injection System	N/A
PCV Valve	PASS
Unleaded Gas Restrictor	PASS
Exhaust Gas Recirculation	PASS
Thermostatic Air Control	N/A
Fuel Evaporative Control	PASS
Oxygen Sensor	PASS
Gasoline Tank Cap	PASS

****
* OBDII Test Results *
* PASS *
* MIL Bulb Working Pass *
* Connector Damage Pass *
* Communications Established Pass *
* MIL Commanded-On Pass *
* Engine RPM at Reading 785 *
****

****

Station Number: 43665
Inspection Class: Emissions

Analyzer Number: EZ620900 Ver. 0602
Receipt/Statement Number: 57
Waiver Number:

Inspector-Mechanic _____
GIOVANNI AGUILAR

Owner's Repair Authorization _____

RETAIN THIS COPY FOR YOUR RECORDS

Total Inspection Fee $6.50 (min) - $30.00

MERCHANTS
TIRE & AUTO CENTERS

COMMERCIAL | Tire Kingdom, INC.
CUSTOMERS | PO Box 116992
REMIT TO: | ATLANTA, GA30368-6992

**** I N V O I C E ****

2005 PONTIAC G6
License: [redacted] NC
Mileage: 39003
Lug Torque 100
Tire Infl F/R 30 30

Cert#

MERCHANTS INC A TIRE KINGDOMCO
GARNER STORE 334
1480 US HIGHWAY 70 WEST
919 779-7004
Customer: 15991765
[redacted]
KNIGHTDALE NC [redacted]
Home# [redacted] Work#
Addl Repairs may be authorized by
VIN#

Invoice# 95462367 - RI
Order Num 70754416 - WI
Page - 1
Opening Salesperson 12932454
Date/Time In..... 01/17/07 11:47:40
Date/Time Out..... 01/17/07 12:45:22
Ship To:

PO#:

Item Number	Item Description	Qty	Price Each	Extended
OCBNC	PROMOTIONAL OIL CHANGE UP TO 6 QUARTS OIL	1		
Haz-Material Disp Ch	Haz-Material Disp Charge		3.00	3.00
PZ-9A	OIL FILTER PENNZOIL 8860	1		
AQ5W30	5W30 BULK OIL AQ5W30	5		
ACAD	CUSTOMER DECLINED A FREE CHECK & ADVISE ALIGNMENT	1		
CASH	Cash Payment			3.20-

IF YOU HAVE A QUESTION OR CONCERN PLEASE TALK TO
OUR STORE MANAGER, BRYAN D. JONES
AT (919) 779-7004

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED $25.
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_____ I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED $_____.
THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR VERBAL APPROVAL.
_____ [redacted]E.
SIGNE[redacted] DATE ____/____/____

Special Credit:	
Total Charges..	3.00
Total Credits..	.00
Sub-Total.....	3.00
New Tire Fees**	.00
Shop Fees(*)	.00
All Taxes.....	.20
Payments.....	3.20-
Net Amount.....	.00

PLEASE PAY ABOVE AMOUNT.
THANK YOU! Closer:12932454

AUTHORIZE SERVICE TO BE PERFORMED, INCLUDING SUBLET WORK, PER THE TERMS AND CONDITIONS ON THE REVERSE "CUSTOMER COPY" OF THIS FORM. MERCHANT'S USES BOTH FLAT RATE AND HOURLY RATE TO CALCULATE CHARGES.
DO_____DO NOT_____WANT MY OLD PARTS RETURNED
PROPOSED METHOD OF PAYMENT; CASH____ CHECK____ CREDIT CARD____
I WILL____ WILL NOT____ BE WAITING FOR MY VEHICLE
CHARGE REPRESENTS COST/PROFIT TO THE VEHICLE REPAIR FACILITY MISC. SHOP SUPPLY OR WASTE DISP.
PLEASE SEE REVERSE SIDE FOR WARRANTY, TERMS, CONDITIONS AND OTHER IMPORTANT INFORMATION

THOMPSON

THOMPSON CADILLAC-PONTIAC-GMC
2600 WAKE FOREST RD. • RALEIGH, NC 27609

www.thompsoncars.com

CUSTOMER NO 026	ADVISOR REGINA BRITT 148	TAG # 5199		INVOICE DATE 12/21/07	INVOICE # PNQS355470
[redacted]	LABOR RATE	PLATE #	MILES 58,951	COLOR LIQUID SILV	STOCK # 29888
ZEBULON, NC [redacted]	YEAR / MAKE / MODEL 05/PONTIAC/G6/4DR SDN			DELIVERY DATE 12/31/04	DELIVERY MILES 10
	VIN # 1G2ZG5283 54 [redacted]			SELLING DEALER # 04057	PRODUCTION DATE
	FTE #	PO #		R O DATE 12/21/07	
[redacted]	REMARKS				MO: 58951

LABOR & PARTS

J# 1 10PNZ ***NCSI(EMISSIONS) TECH(S):77 0.00
STICKER # AD467687
COMPLETED REINSPECTION

JOB # 1 TOTAL LABOR & PARTS 0.00

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # 1	EMISS	EMISSION SAFETY STICKER		6.25
			TOTAL - MISC	6.25

TOTALS

GM PARTS INSTALLED CARRY A 12 MONTH, 12,000 MILE PARTS AND LABOR WARRANTY WHICH EVER OCCURS FIRST.

YOU MAY RECEIVE A SURVEY FROM GENERAL MOTORS IN THE NEXT FEW DAYS. IF FOR ANY REASON YOU CANNOT GRADE US "COMPLETELY SATISFIED" ON EVERY QUESTION, PLEASE CONTACT GINO LATTARULO (919-645-2040) OR JOHN REEVES (919-645-2039) IN THE SERVICE DEPARTMENT. WE APPRECIATE YOUR BUSINESS!

TOTAL LABOR....	0.00
TOTAL PARTS....	0.00
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	6.25
TOTAL MISC DISC	0.00
TOTAL TAX.....	0.00
TOTAL INVOICE $	**6.25**

TERMS: CASH UNLESS ARRANGEMENTS MADE

DISCLAIMER OF WARRANTIES

THE ONLY WARRANTIES IF ANY APPLYING TO THESE PARTS AND FOR SERVICES ARE THOSE OFFERED BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND THE SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THESE PARTS AND/OR SERVICES BUYER SHALL NOT BE ENTITLED TO RECOVER FROM SELLER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS OR INCOME OR ANY OTHER INCIDENTAL DAMAGES

SERVICE DIRECT (919) 828-8139
TOLL FREE (800) 543-6537
MAIN (919) 834-0311

CUSTOMER PAYMENT :
( ) CASH ( ) CHECK #
( ) CHARGE ( ) CREDIT CARD

CASHIER..... PAYMENT DATE 12/21/07

CUSTOMER SIGNATURE

 CUSTOMER COPY [END OF INVOICE] 12:39pm

THOMPSON

THOMPSON CADILLAC-PONTIAC-GMC
2600 WAKE FOREST RD. • RALEIGH, NC 27609
www.thompsoncars.com

CUSTOMER NO.	TAX EXEMPT NO.	CUST. P.O. NO.	SHIP VIA	PAY	SOLD BY	INVOICE DATE	INVOICE NO.
1111		REGINA		PENDING	BILLY WINSTON	11/26/07	233840 OLR

BILL TO

RETAIL SALE
2600 WAKE FOREST RD
RALEIGH, NC 27609-7838

SHIP TO

SHIP QTY.	B.O.QTY.	PART NUMBER/DESCRIPTION	BIN	LIST	NET	AMOUNT
1	0	15779416 BLADE 10.146	255	29.00	29.00	29.00

FEATURING

CADILLAC PONTIAC GMC CHEVROLET CHEVY TRUCK OLDSMOBILE BUICK

NO RETURNS WITHOUT THIS INVOICE. 20% HANDLING CHARGE ON RETURNED PARTS. NO RETURNS AFTER 60 DAYS. NO RETURNS ON ELECTRICAL OR SPECIAL ORDER PARTS. SEE BACK OF INVOICE FOR RETURN POLICY. ANY WARRANTIES ON THE ITEM/ITEMS SOLD HEREBY ARE THOSE MADE BY THE MANUFACTURER. THE SELLER, THOMPSON CADILLAC-PONTIAC-GMC, HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND THOMPSON CADILLAC-PONTIAC-GMC NEITHER ASSUMES FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THIS ITEM/ITEMS.

RECEIVED BY X _____

SUBTOTAL	29.00
TAX	1.96
FREIGHT	0.00
PAY THIS AMOUNT	30.96

GM PARTS CENTER

AREA CODE 919
Parts - 834-2571
Fax - 834-7792
1/800-243-8806

TOLL FREE NUMBER
NATIONWIDE
1/800-662-7420

KEEP THAT GREAT GM FEELING WITH GENUINE GM PARTS

ALL PARTS RETURNED MUST BE IN THE ORIGINAL CONTAINER AND IN RESALEABLE CONDITION.

CUSTOMER COPY

14:03:16 PAGE 1 OF 1
NET505

PARTS INVOICE

esis

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Deborah Chisholm
Claims Administrator

May 14, 2008

Amica Insurance
4800 Falls of Neuse Rd Ste 320
Raleigh, NC 27609-8140

RE: Claimant: [redacted]
Our File No.: 643415 (Yours: LO9200703131D)
Our Client: General Motors Corporation
Date/Event: 10/19/07
Vehicle: 2005 Pontiac G6
VIN: 1G2ZG528354[redacted]

Dear Ms. Brown:

This will confirm that we have completed our review of your claim regarding your insured's 2005 Pontiac G6. At this time, based on all documentation received and reviewed, ESIS, on behalf of General Motors Corporation, will not be in a position to honor your request for damages. If you have any additional evidence that supports your claim of a product defect, please forward it to my attention for further review.

Also, you have an obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their immediate post-incident condition for as long as you intend to pursue a claim and/or cause of action.

Sincerely,

Deborah Chisholm
Claims Administrator

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Deborah Chisholm
Claims Administrator

May 14, 2008

Amica Insurance
4800 Falls of Neuse Rd Ste 320
Raleigh, NC 27609-8140

RE: Claimant: [redacted]
Our File No.: 643415 (Yours: LO9200703131D)
Our Client: General Motors Corporation
Date/Event: 10/19/07
Vehicle: 2005 Pontiac G6
VIN: 1G2ZG528354[redacted]

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Also, you have an obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their immediate post-incident condition for as long as you intend to pursue a claim and/or cause of action.

Sincerely,

Deborah Chisholm
Claims Administrator

Service Request Detail

SR No.	71-601114669	Ref No.		Goodwill	No Goodwill Offered	BRC Type	PAR
Account		Site		GW SubType		Bus. Unit	BRC
Last Name	[redacted]	First Name	[redacted]	Approval	Not Initiated	Area	PAR
Daytime #	[redacted]	Evening #	[redacted]	UCC	Steering - General	Sub-Area	Initiate PAR- Property Damage
Address	[redacted]	City	Las Vegas	Involved Dlr	Fairway Chevrolet Company	Safety	Yes
State	NV ZipCd [redacted]	Con Acct		Source	Phone	Updated	2/12/2008 03:50:02 PM
Serial #/VIN	1G1ZS52F95F [redacted]	Model Year	2005	Priority	Medium License #	Owner	MARQUEMO
Make	Chevrolet	Warr. Start	08/06/2004	Status	Open	Opened	2/8/2008 01:35:35 PM
Model	Malibu	Mileage	39800	Sub-Status	Satisfied	Closed	

Abstract: Collision - Steering - General - Third Party Property - Insurance Involvement

Customer Description: ***This is a BRC PAR Case. Please do not assume. Forward any inquiries to Monica Marquez at ext.21072 ***

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Owner	1/24/2008 03:37:00 PM	N	1	1	Concrete	Dry	n/a	080124-1861

Name	Height	DOB	Disabilities
[redacted]	5'8"	[redacted]	glasses but not restricted to wearing it

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Vega	Jimmy, Jr.	[redacted]	All State

Incident Loc: [redacted]

Incident Desc: coming up on the street. veh suddenly pulled to the driver's side, locked up and hit another veh. steering just went out.

Component: Steering failed ,Ding on the door and finder was damaged and left signal was damaged and chrome on the front and bumper was damaged, hood was

Damage Desc: it messed up the whole plastic/fiber glass fender of the other veh. veh's driver's side taillight, grill, windshield wiper tank.

Vehicle Loc: Honda Crysler, 3115 East Fremont St and Mojabe St

Add'l Info: Insurance company already approved repairs

Emgcy Svc Names: Las Vegas Police Dept - Traffic Collision Info 8283475. 8283476.

Maint Loc: Tow and Dodge at Blvd Mall

PAR Detail

Collision	Y	Non Collision	Property Damage	Y	Thermal Evt	N	Spec Equip	wheels	
Vehicle Speed	20		Weather Condition	Dry			Prop Owner	Unknown name and number	Property Type: Unknown of Vehicle
Last Service Date	9/12/2007		Loc Last Service				Property Location	unknown	Prop Est Repair Cost
Veh Est Repair Cost	$2,487.00		Spec Equip Installer	unknown of who installed since cust is the second			Prop Damage Description	The passanger side of the veh is damaged front fender	
Primary Veh Use	Personal		Inspection Type				Inspected By	Inspection Not Performed	Inspection Date/Time
Veh Damage Description	Ding on the door and finder was damaged and left signal was damaged and chrome on the front and bumper was damaged, hood was crumpled, it messed up the whole plastic/fiber glass fender of the other veh. veh's driver's side taillight, grill, windshield						Explain Other	Transferred File to ESIS due to third party property damages, insurance involvemen	

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/13/2008 11:42:43 AM	MARQUEMO	MARQUEMO	Outbound Call Third Party	Made Contact	Done	2/13/2008 11:51:11 AM	Called: 1-800-347-3366 at ext.5638.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Spoke with:Robert Cortez - Insurance Company

CRS adv:returning your phone call

TP sts:cust doesn't understand and cust wanted me to call you and see what is going on, I wanted to know what is gm doing at this time

CRS adv: cust sts he was in a collision due to the steering failing and he hit an third party. As well as cust did tell CRS that his insurance paid for the body damages, I told cust this file would be fowarded to our centrals claims dept due to Third Party Property Damages - Insurance Involvement - Insurance did cover the body damages. I told cust as well somone will be incontact with cust in 7-10 business days from that dept.

TP sts:asked for SR#

CRS adv: provided number to TP. advised at this time we are waiting for ESIS to pick up this file and call the cust

TP agreed

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/13/2008 11:39:20 AM	MARQUEMO	MARQUEMO	Inbound Call Third Party	Voice Mail Received	Done	2/13/2008 11:42:20 AM	Insurance Company called seeking an update on File

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Insurance company sts: This is Robert Cortez calling about our cust by the name of I was wanting to know what your dept is doing for the cust, if you can give me a call back at 1-800-347-3366 at ext.5638.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 04:08:11 PM	MARQUEMO	MARQUEMO	Scheduled Follow-up		Scheduled Alarm		Scheduled Follow-up

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 04:07:05 PM	MARQUEMO	MARQUEMO	BRC PAR	ESIS- Property Damage	Done	2/12/2008 04:08:05 PM	ESIS - Third Party Property Damages - Insurance Involvement - Insurance did cover the body damages

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

foward file to ESIS due to cust sts steering failed causing him to his a Third Party and there being third party Property Damages - Insurance Involvement - Insurance did cover the body damages.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 04:06:06 PM	MARQUEMO	ESISBIQU	Escalation	ESIS - Property Damage	In Progress		ESIS - Third Party Property Damages - Insurance Involvement - Insurance did cover the body damages

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

ESIS - Third Party Property Damages - Insurance Involvement - Insurance did cover the body damages

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 12:29:15 PM	CISNERMA	MARQUEMO	Notify CRM		Done	2/12/2008 01:07:14 PM	dlr called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

see prev IB call

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 12:27:52 PM	CISNERMA	CISNERMA	Inbound Call Dealer	Service Request Update	Done	2/12/2008 12:29:14 PM	calling back

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS adv: Do you know of this cust or anything about their situation?

Dlr sts: No one here knows about that cust or vehicle

Matthew Cisneres/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 12:10:02 PM	STEWARST	MARQUEMO	Notify CRM		Done	2/12/2008 01:07:58 PM	Cust Called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Cust called requesting to know when the OCRS was going to try calling back. CRS let him know that it would be today btw 3-5EST

Cust request trying to calling irst and sec

See previous ib for more information

Stewart/CAC/Chatham

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 12:06:03 PM	STEWARST	STEWARST	Inbound Call Customer	Complex Request	Done	2/12/2008 12:10:01 PM	**ASSISTING**

[redacted]	rst Name	Account	BAC Code

Comments

Cust Sts: I am calling about my malibu. I think that somebody called here this morning.

Cust Sks: To know when they are going to try calling

CRS Sts: It does look like the OCRS tried calling at 11:37. I do see here that they plan on calling you back btw 3-5EST to give you the action plan

Cust Sts: They they try calling first and if they don't get me

CRS Sts: I will let them know that.

Stephanie Stewart/CAC/Chatham

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/12/2008 11:37:33 AM	MARQUEMO	MARQUEMO	Scheduled Outbound Call Cust		Done	2/12/2008 03:34:18 PM	Call cust

[redacted]	Name	Account	BAC Code

Perform initial contact

Monica Marquez/BRCPAR/ATX x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 04:34:41 PM	MARQUEMO	MARQUEMO	Scheduled Outbound Call Cust		Done	2/12/2008 11:37:26 AM	CALL CUST

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Action Plan:Peform Ack

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 02:00:34 PM	MARQUEMO	MARQUEMO	Ownership Changed	Ownership Escalated to BRC	Done	2/11/2008 02:00:34 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 01:51:08 PM	VALVERDM	MARQUEMO	Notify CRM		Done	2/11/2008 01:57:26 PM	see inbound

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 01:46:33 PM	VALVERDM	VALVERDM	Inbound Call Customer	Customer	Done	2/11/2008 01:50:50 PM	cust called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

cust called and wanted to know status of his case. crm did give him name of ext of owning crm. did transfer to their ext.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:42 AM	DRAHEICM	MARQUEMO	Ownership Changed		Done	2/11/2008 11:33:42 AM	Service Request Ownership has changed FROM: HARDERSU TO: MARQUEMO

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:24 AM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact- Phone	Done	2/12/2008 04:05:57 PM	called: [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS adv:asked detailed questions

Cust sts: Cust was coming across on 8th street and weaver street and all of a sudden the veh pulled to driver side then cust tried to correct the veh and cust sts hit the left veh on the driver side. cust sts the steering pulled causing cust to hit the third party. Cust doesn't have the third partys info, no name or number or what kind of vehicle.No fire report but cust does have the police report, cust is responsibile for the the damages, cust sts his insurance did pay for the body damage but cust has to pay his 500.00 deductable.The damages to the veh is the front drivers side. cust sts he wants the mechanical part done since insurance didn't cover that part.

Cust sks: Power Steering Fixed

CRS adv:since there is insurance involvement and third party damages this file would have to be fowarded to our centrals claims dept.

Cust sts: the dlr wants me to pick up the veh and i don't know what to do

CRS adv: If the dlr is asking you to pick up the veh then you would have to, you would have to wait for the other dept to call you

Cust agreed

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:18 AM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact- Dealer	Done	2/12/2008 11:35:05 AM	called: [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Spoke with: Service Manager - Allan Folks

Left Message

CRS adv: calling on a cust by the name of [illegible] with his 2005 Chevrolet Malibu and he was in a collision due to steering failing and he hit a third party. If you can give me a call back and let me know if cust has contacted you or if you know of the allegaiton. Provided number and extention.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:12 AM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact-AVM	Done	2/12/2008 11:48:40 AM	called:Larry Adler - DVM of Fairway Chevrolet

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

This is Monica Marquez w/ PAR located in Austin, TX
Customer [redacted]
Service Request # [redacted]114869
Vehicle Information:2005 Chevrolet Malibu
Involved Dealership:Fairway Chevrolet
Nature of allegation:cust sts was in a collision due to steering failing and they hit a third party,will be fowarding this file over to our centrals claims dept due to the third party damages and insurance involvement.
CRS adv if you have any additional information pertaining to customer or vehicle please contact me at 1-866-790-5700 ext 21072. If no further info there is no need for a call back and this is just an FYI to let you know what is going on.

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:07 AM	DRAHEICM	MARQUEMO	BRC PAR	Acknowledgement	Done	2/12/2008 11:36:53 AM	called [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Left Message

CRS adv:calling from gm par dept I am calling on regards to your 2005 Chevrolet Malibu if you can give me a call back at 1-866-790-5700 ext 21072.

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:33:02 AM	DRAHEICM	MARQUEMO	Notify CRM		Done	2/11/2008 02:07:19 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:32:56 AM	DRAHEICM	MARQUEMO	Research		Done	2/11/2008 02:08:17 PM	research vin

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS Performed VIN Scan

GMVIS: Found No Open Recalls

VIN: – Found No Duplicate File

SVC History: No svc history appears to be related

Monica Marquez/BRCPAR/ATX
X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 11:32:41 AM	DRAHEICM	MARQUEMO	BRC PAR	Case Assigned	Done	2/11/2008 02:02:59 PM	assigned to monica marquez ext 21072

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 10:13:19 AM	DRAHEICM	HARDERSU	SR Opened		Done	2/11/2008 10:13:19 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/11/2008 10:13:17 AM	DRAHEICM	HARDERSU	SR Closed - Satisfied		Done	2/11/2008 10:13:17 AM	Service Request has been Closed Satisfied.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/8/2008 02:05:00 PM	HARDERSU	DRAHEICM	Escalation	Initiate PAR	Done	2/11/2008 10:12:54 AM	Assigning activity to PAR QUEUE.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days.

Crs gave the number to the business resource center: 800-231-1841 as cust requested for a number to call to follow-up.

Sharon Harder/Elemental CAC /Mnla
22907

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/8/2008 01:56:45 PM	HARDERSU	HARDERSU	Outbound Call Customer	Made Contact	Done	2/8/2008 02:04:52 PM	accident (collision) due to the power steering

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

crs called back cust and got info to fill up BRC.

crs advised cust that this will be escalated to the product allegations section of the business resouce center.

Sharon Harder/Elemental CAC /Mnla
22907

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/8/2008 01:39:16 PM	HARDERSU	HARDERSU	Inbound Call Customer	Complex Request	Done	2/8/2008 02:04:46 PM	accident due to power steering lock-up

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

cust sts: veh concern. was in an accident due to the power steering. coming up on the street. veh suddenly pulled to the driver's side, locked up and hit another veh. received a letter about the power steering. did not bring the veh to the dlrship since it was nothing major till this happened. cust in cellphone. requested to be called on his home #.

cust ska: to report about the collision

crs advised: will c/b cust at his landline to get info

Sharon Harder/Elemental CAC /Minta
22907

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M01	Power - Lack of	Steering - General

GM Vehicle Inquiry System
Summary

[redacted]

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZS52F95F[redacted]

VEHICLE INFORMATION

Merchandising Model :	1ZS69 -2005 MALIBU BASE SEDAN	Warranty Start Date :	08/06/2004
BARS Order Type :	50 - FLEET		
Delivering Dealer :	POWER CHEVROLET PO BOX 1209 PEORIA , AZ 85380-1209 (623) 974-0000	Selling Source :	13 - CHEVROLET
		Site Code :	39298
		Business Associate Code :	165634

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Vehicle Has No Current Record Of Outstanding Campaigns

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	08/06/2004	10 miles	08/06/2007	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	08/06/2004	10 miles	08/06/2010	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	08/06/2004	10 miles	08/06/2012	80010 miles
36/50000 CALIFORNIA EMISSIONS	08/06/2004	10 miles	08/06/2007	50010 miles
84/70000 CALIFORNIA SELECT COMPONENT	08/06/2004	10 miles	08/06/2011	70010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
02/12/2007	042690	#	C3128 - HEADLINING TRIM PANEL REPLACEMENT	35752 miles
			B5480 - REAR COMPARTMENT LID LOCK CYLINDER	

[redacted]

02/12/2007	042690	#	REPLACEMENT	35752 miles
01/31/2007	041304	#	N6614 - WIRING AND/OR CONNECTOR - INTERIOR/REAR COMPARTMENT LIGHTI	35714 miles
01/31/2007	041304	#	R4490 - TRANSMITTER, REMOTE DOOR/REAR COMPARTMENT LOCK - REPLACE	35714 miles
11/28/2006	046954	#	N2827 - RELAY, POWERTRAIN SYSTEM - REPLACE	35123 miles
11/28/2006	046954	#	R4485 - BATTERY, REMOTE DOOR/REAR COMPARTMENT LOCK TRANSMITTER - R	35123 miles
09/06/2006	G06416	#	Z2081 - ROADSIDE SERVICE (LOCKOUT)	34000 miles
08/17/2006	F53586	#	Z2083 - ROADSIDE SERVICE (BATTERY/JUMP START)	34000 miles
12/05/2005	094959	#	C0040 - INSIDE REARVIEW MIRROR REPLACEMENT	27438 miles
11/28/2005	094119	#	R0760 - RADIO, REMOVE AND REPLACE	27423 miles
11/16/2005	088798	#	R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC	26336 miles
10/11/2005	088798	#	R0755 - RADIO RECEIVER-RETURN TO AC/DELCO ESC-INCOMPLETE EXCHANGE	26336 miles
07/06/2005	077583	#	Z7910 - 1-WAY SHUTTLE COURTESY TRANSPORTATION	22870 miles
07/06/2005	077583	#	N6640 - WIRING AND/OR CONNECTOR - HORN - REPAIR OR REPLACE	22870 miles
08/05/2004	A26483	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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FAIRWAY CHEVROLET

THE LOW PRICE POWERHOUSE

P.O. Box 42997 • 3100 East Sahara • Las Vegas, Nevada 89104 • (702) 641-1400

SERVICE & RESERVATIONS
641-1432

NEVADA'S ONLY CHEVROLET CERTIFIED "SERVICE SUPREMACY" DEALERSHIP
www.fairwaychevy.com

06500 F-5

Adv: 177 STEPHEN BERCZIK	Tag: 8097	License: [redacted]	1G12S52F9 5E[redacted]	Page: 1	Invoice: C90048

[redacted]
LAS VEGAS, NV [redacted]
Work: [redacted] Home: [redacted]

[redacted]
LAS VEGAS, NV [redacted]
Work: [redacted] Home: [redacted]96

Odometer In: 40016 Out:	Dist: CHV CUS C Prelim	05 CHEVROLET MALIBU 4DR SDN WHITE	
Begin: 03/20/08	Done: 03/21/08	Invoiced: 03/21/08 08:18 KB	Inservice: 08/06/04 Sold: 00/00/04

Concern 24 Cause Correction Comment Type: C	TIRE MEASUREMENT . TIRE MEASUREMENT TIRE MEASUREMENT Tech 477 WERSH, RICHARD FAIL CODE : .	Operation TIRE	Tech 477	Amount 0.00
		Subtotal TOTAL CHARGE FOR CONCERN		0.00
Concern 25 Cause Correction Comment Type: C	BRAKE MEASUREMENT BKS 6MM BRAKE LINING REMAINING 6MM BRAKE LINING REMAINING Tech 477 WERSH, RICHARD FAIL CODE : .	Operation BKS	Tech 477	Amount 0.00
		Subtotal TOTAL CHARGE FOR CONCERN		0.00
Concern 51 Cause Correction Comment Parts	C/S VEHICLE LOST STEERING ASSIST CAUSING HIM TO CRASH INTO ANOTHER VEHICLE ALSO ENTER MILEAGE NO COM TO POWER STEERING CONTROL MODULE----------DIAGNOSED & REPLACED BAD MOTOR\MODULE ASSEMBL Y	Operation CASH	Tech 477	Amount 283.20

Part Number	POS	Note	Description	Qty	Sell	
	286082		DAYNIGHT 11197	1	67.00	67.00
000 025005894			MOTOR	1	364.39	364.39

Tech 477 WERSH, RICHARD

UNLESS OTHERWISE NOTED, ALL PARTS ITEMIZED ON THIS INVOICE ARE NEW GENERAL MOTORS PARTS.

I ACKNOWLEDGE RECEIPT OF THE PARTS AND LABOR LISTED ABOVE. X

UCS02004

Tax I.D. 88-0109211

CUSTOMER COPY

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ADV: 177 STEPHEN BERCZIK	Tag: 8097	License: [redacted]	1G12S52F9 5F[redacted]	Page: 2	Invoice: C90048

Invoiced: 03/21/08 09:18:05 KB

05 CHEVROLET MALIBU 4DR SDN WHITE

Type: C

Subtotal	
PARTS	364.39
SUBLET	67.00
LABOR MECHANICAL	283.20
TOTAL CHARGE FOR CONCERN	714.59

Concern +52 C/S VEHICLE SAT FOR A LONG WAITING ON GM BATTERY WENT WONT TAKE A CHARGE CUSTOMER BROUGHT BATTERY WE INSTALLED

Cause BATTERY WONT HOLD CHARGE

Correction REPLACED BATTERY

Tech 477 HERSH, RICHARD

Operation	Tech	Amount
CASH	477	49.70

Type: C

Subtotal	
LABOR MECHANICAL	49.70
TOTAL CHARGE FOR CONCERN	49.70

PARTS	364.39
SUBLET	67.00
MATERIALS / HAZARDOUS WASTE	33.29
LABOR MECHANICAL	332.90
SUB-TOTAL	797.58
TAX	30.82
TOTAL CHARGE	828.40

TOTAL CHARGE ~~828.40~~

CASH DUE 2X 828.40

ok to pay
J. Hersh Allen
4/3/08
Last Page

If you have any questions - please see STEPHEN BERCZIK
IN ORDER TO PROVIDE BETTER SERVICE, FAIRWAY
NOW OFFERS SERVICE RESERVATIONS CALL 558-2483

UNLESS OTHERWISE NOTED, ALL PARTS ITEMIZED ON THIS INVOICE ARE NEW GENERAL MOTORS PARTS.

I ACKNOWLEDGE RECEIPT OF THE PARTS AND LABOR LISTED ABOVE. X

VCS02004

CUSTOMER COPY

Service Request Detail

SR No.	71-607175320	**Ref No.**		**Goodwill**	No Goodwill Offered	**BRC Type**	PAR
Account		**Site**		**GW SubType**		**Bus. Unit**	BRC
Last Name	[redacted]	**First Name**	[redacted]	**Approval**	Not Initiated	**Area**	PAR
Daytime #	[redacted]	**Evening #**		**UCC**	Steering - Column / Ignition Lock /	**Sub-Area**	Initiate PAR- Collision
Address	[redacted]	**City**	La Vergne	**Involved Dlr**	Walden Fleet Group, Inc.	**Safety**	Yes
State	TN **ZipCd** [redacted]	**Con Acct**		**Source**	Phone	**Updated**	3/7/2008 09:37:35 AM
Serial #/VIN	1G2ZG558264 [redacted]	**Model Year**	2006	**Priority**	Medium **License #**	**Owner**	CISNERMA
Make	Pontiac	**Warr. Start**	07/22/2005	**Status**	Open	**Opened**	2/28/2008 06:51:53 PM
Model	G6	**Mileage**	51000	**Sub-Status**	Satisfied	**Closed**	
Abstract	Steering Column						
Customer Description	This is a BRC PAR Case. Please do not assume. Forward any inquiries to Matthew Cisneros at ext.21171						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Owner	2/28/2008 10:30:00 AM	N	0	1	Asphalt	Dry	n/a	n/a

Driver Last Name	Driver First Name	Height	DOB	Disabilities
unknown	unknown	5'7"	[redacted]	None

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Loftis	Marti		State Farm Insurance

Incident Loc	Interstate 24 near New Jardin Place Exit	**Incident Desc**	Was driving, steering column locked, when unlock, car starting speening and ended up crashing
Component	Steering Column	**Damage Desc**	damaged is all on drivers side from hood to trunk
Vehicle Loc	Caners Car Care, Body shop	**Add'l Info**	State Farm claim
Emgcy Svc Names	Nashville Metro PD	**Maint Loc**	Firestone

PAR Detail

Collision	Y	**Non Collision**	**Property Damage**	N	**Thermal Evt**	N	**Spec Equip**	none	
Vehicle Speed	65		**Weather Condition**	clear			**Prop Owner**	n/a	**Property Type** n/a
Last Service Date			**Loc Last Service**	N/A			**Property Location**	n/a	**Prop Est Repair Cost** $0.00
Veh Est Repair Cost	$7,000.00		**Spec Equip Installer**	n/a			**Prop Damage Description**	n/a	
Primary Veh Use	Personal		**Inspection Type**	Other			**Inspected By**	Inspection Not Performed	**Inspection Date/Time**
Veh Damage Description	drivers side damage						**Explain Other**	n/a	

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/12/2008 09:55:49 AM	TOLBERWH	TOLBERWH	BRC PAR	ESIS- Insurance Involvement	Done	3/12/2008 09:57:55 AM	Sent to ESIS for Insurance Involvment

Contact Last Name	Contact First Name	Account	BAC Code

Comments

The customer was in a collision and has contacted their insurance company and i currenty pending repair estimate

Whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/12/2008 09:55:16 AM	TOLBERWH	ESISBIQU	Escalation	ESIS - Insurance Involvement	In Progress		Assign to ESIS

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/7/2008 11:06:59 AM	DRAHEICM	TOLBERWH	Notify CRM		Done	3/12/2008 09:55:15 AM	ESIS - Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code

Recieved and assigned to ESIS

Whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/7/2008 09:42:00 AM	CISNERMA	CISNERMA	Scheduled Follow-up		Scheduled Alarm		71-607175320 check

Contact Last Name	Contact First Name	Account	BAC Code

Comments

check to see if case has been sent to ESIS

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/7/2008 09:41:35 AM	CISNERMA	KINZERTH	BRC PAR	ESIS- Insurance Involvement	Done	3/7/2008 11:06:58 AM	ESIS - insurance involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Received and assigned for ESIS escalation
Thaddeus Kinzer/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/7/2008 09:33:04 AM	CISNERMA	CISNERMA	Outbound Call Customer	Made Contact	Done	3/7/2008 09:38:03 AM	called [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments
see initial

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 03:19:32 PM	CISNERMA	CISNERMA	Scheduled Outbound Call Cust		Done	3/7/2008 09:33:03 AM	71-607175320 call

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

call [redacted] and make 2nd attempt at initial

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 03:19:08 PM	CISNERMA	CISNERMA	Outbound Call Customer	Left Message	Done	3/6/2008 03:19:31 PM	called [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments
made acknowledgement

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:20:17 PM	CISNERMA	CISNERMA	Ownership Changed	Ownership Escalated to BRC	Done	3/6/2008 02:20:17 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:10:04 PM	DRAHEICM	CISNERMA	Ownership Changed		Done	3/6/2008 02:10:04 PM	Service Request Ownership has changed FROM: ARQUERMA TO: CISNERMA

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:48 PM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- Phone	Done	3/7/2008 09:41:20 AM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS asked PAR detailed questions

CRS adv: Are you being held responsible for any property damage?

cust sts: As of right now I don't know because I did knock out a pole but no one has contacted me about it.

CRS adv: Is insurance involved

cust sts: Definitely they have my car at a shop right now and they are working on getting estimates

CRS adv: Will have to forward case to our insurance company, ESIS, and they will work with you and your insurance company on a resolution. Coulod take up to 10 business to be in contact.

cust sts: OK

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:42 PM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- Dealer	Done	3/6/2008 03:16:22 PM	could not complete

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

fleet vehicle has not been to a GM dlr

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:36 PM	DRAHEICM	CISNERMA	BRC PAR	Initial Contact- AVM	Done	3/6/2008 03:17:27 PM	called DVM Heggarty, Elizabeth

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

DVM Heggarty, Elizabeth
Node: 630092
Mailbox: 8083

CRS adv: Customer Name, Vehicle information, Nature of allegation
CRS adv: if you have any additional information pertaining to cust or vehicle please call me @ 866-790-5700 ext 21171

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:31 PM	DRAHEICM	CISNERMA	BRC PAR	Acknowledgement	Done	3/6/2008 03:18:53 PM	called [redacted]

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

left message

CRS adv: Received case in PAR, please call back

Matthew Cisneros/par/atx

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:26 PM	DRAHEICM	CISNERMA	Notify CRM		Done	3/6/2008 02:15:17 PM	file assigned

Contact Last Name | Contact First Name | Account | BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:21 PM	DRAHEICM	CISNERMA	Research		Done	3/6/2008 02:17:24 PM	resaerch vin

Contact Last Name | Contact First Name | Account | BAC Code

Comments

Recalls: No open recalls

History: No related repairs

SRs: No other SRs

Matthew Cisneros/par/atx

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 02:09:06 PM	DRAHEICM	CISNERMA	BRC PAR	Case Assigned	Done	3/6/2008 02:15:13 PM	assigned to matt cisneros ext 21171

Contact Last Name | Contact First Name | Account | BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 11:27:27 AM	DRAHEICM	ARQUERMA	SR Opened		Done	3/6/2008 11:27:27 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name | Contact First Name | Account | BAC Code

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/6/2008 11:27:26 AM	DRAHEICM	ARQUERMA	SR Closed - Satisfied		Done	3/6/2008 11:27:26 AM	Service Request has been Closed Satisfied.

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/5/2008 04:47:26 PM	ARQUERMA	DRAHEICM	Escalation	Initiate PAR	Done	3/6/2008 11:27:07 AM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Julie Anderson (Ma. Florencia Arqueros) / CAC T1 / BA / Ext: 12302 / Lvl 1

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
3/5/2008 04:38:42 PM	ARQUERMA	ARQUERMA	Outbound Call Customer	Made Contact	Done	3/5/2008 04:47:17 PM	RFI Campaign

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Crs adv: calling reg incident with Pontiac G6 steering column.

Crs adv: need to file in a form so our PAR dept can get in touch with him reg this incident

Cust agreed to answer questions

Crs adv: his information will be forwarded to the Product Allegation Department within the BRC

Julie Anderson (Ma. Florencia Arqueros) / CAC T1 / BA / Ext: 12302 / Lvl 1

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/29/2008 01:29:47 PM	ARQUERMA	ARQUERMA	Scheduled Outbound Call Cust		Done	3/5/2008 04:47:25 PM	Call cust

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Crs will call cust to initiate par case

Julie Anderson (Ma. Florencia Arqueros) / C. CAC / BA / Ext: 12302 / Lvl 1

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/29/2008 01:28:21 PM	ARQUERMA	ARQUERMA	Outbound Call Customer	Left Message	Done	2/29/2008 01:29:45 PM	RFI Campaign

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Crs left VM adv: calling reg incident with Pontiac G6 steering column.

Crs prov SR and contact info

Julie Anderson (Ma. Florencia Arqueros) / C. CAC / BA / Ext: 12302 / Lvl 1

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/28/2008 06:57:47 PM	ARQUERMA	ARQUERMA	Scheduled Outbound Call Cust		Done	2/29/2008 01:30:05 PM	Call cust

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Crs will call cust to initiate par case

Julie Anderson (Ma. Florencia Arqueros) / C. CAC / BA / Ext: 12302 / Lvl 1

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
2/28/2008 06:56:02 PM	ARQUERMA	ARQUERMA	Inbound Call Customer	Complex Request	Done	2/28/2008 06:57:46 PM	Cust allegates product failure causes steering column to lock

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Cust sts: was driving in the HWY and steering column locked and he crushed against a pole. Firestone mentioned there was a problem on rack and pinion

Cust sks: info on RC

Crs adv: no RC on veh. If it's being investigated we don't have info.

Cust sts: insurance company is handleing case.

Julie Anderson (Ma. Florencia Arqueros) / C. CAC / BA / Ext: 12302 / Lvl 1

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M41	Inoperative	Steering - Column / Ignition Lock / Parts

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZG558264[redacted]

VEHICLE INFORMATION

Merchandising Model :	2ZG69 -2006 G6 - 6CYL SEDAN	**Warranty Start Date :**	07/22/2005
BARS Order Type :	50 - FLEET		
Delivering Dealer :	WALDEN FLEET GROUP, INC. 6 SYLVAN WAY PARSIPPANY , NJ 07054-3826	**Selling Source :**	16 - PONTIAC
		Site Code :	14040
		Business Associate Code :	111571

Service Contract :	No	**Branded Title :**	No	**Warranty Block :**	No	**PDI Status :**	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
RC	05094	SUN VISOR MIRROR COVER NONFUNCTIONAL/BREAKAGE *IN EFFECT UNTIL DEC. 31, 2006*	N/A	Closed

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	07/22/2005	10 miles	07/22/2008	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	07/22/2005	10 miles	07/22/2011	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	07/22/2005	10 miles	07/22/2013	80010 miles
36/36000 FEDERAL EMISSION	07/22/2005	10 miles	07/22/2008	36010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
10/20/2006	304337	#	B4051 - LINK OR SPRING, FRONT DOOR HOLD OPEN - LEFT -	29971 miles

			REPLACE	
05/17/2006	017060	#	V1427 - 05094 - REPLACE BOTH MIRROR ASSEMBLIES	14118 miles
07/21/2005	A34352	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System
Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZG558264[redacted]

CLAIM HISTORY

Repair Order Date :	10/20/2006	Repair Order Number :	304337	Odometer Reading :	29971 miles
Serviced By :	AVIS RENT A CAR PO BOX 61004 DALLAS, TX 75261	Selling Source :	16 - PONTIAC		
		Site Code :	71138		
		Business Associate Code :	126649		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
11/10/2006	742	01	#	B4051 - LINK OR SPRING, FRONT DOOR HOLD OPEN - LEFT - REPLACE	N/A	N/A	N/A	$ 11.77	N

Repair Order Date :	05/17/2006	Repair Order Number :	017060	Odometer Reading :	14118 miles
Serviced By :	AVIS RENT A CAR PO BOX 61004 DALLAS, TX 75261	Selling Source :	16 - PONTIAC		
		Site Code :	71138		
		Business Associate Code :	126649		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
06/02/2006	696	01	#	V1427 - 05094 - REPLACE BOTH MIRROR ASSEMBLIES	15803235 - SS-MIRROR	N/A	N/A	$ 60.04	N

Repair Order Date :	07/21/2005	Repair Order Number :	A34352	Odometer Reading :	0 miles
Serviced By :	AVIS RENT A CAR PO BOX 61004 DALLAS, TX 75261	Selling Source :	16 - PONTIAC		
		Site Code :	71138		
		Business Associate Code :	126649		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments

07/26/2005	607	01	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	N/A	N/A	N/A	$ 70.43	N

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System
Vehicle Build

VIN	1G2ZG558264[redacted]

VEHICLE BUILD

Merchandising Model :	2ZG69 -2006 G6 - 6CYL SEDAN		
Gross Vehicle Weight Rating :	1988 kg (4384 lb)	**Order Number :**	JFBZPX
Build Date :	07/21/2005	**Build Plant :**	164Z

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AK5 - FRONT SIDE IMPACT AIR BAGS	AP9 - CARGO NET
A51 - SEAT, FRONT 45/45 BUCKET	BQ2 - FLT-AVIS RENT A CAR
B0L - VEHICLE GM PROD WEEK 29	B37 - FLOOR MATS, CARPET
C60 - AIR CONDITIONING, CUSTOM	DL5 - DECAL ROADSIDE SERVICE
D49 - POWER OUTSIDE REAR VIEW-MIRRORS	FAD - SIMULATED WALNUT BURL ACCENTS
FE0 - SUSPENSION, TOURING	FE9 - 50-STATE EMISSIONS
FLT - FLT-FLEET ORDERS	F83 - AXLE RATIO 3.05
IBB - TRIM INTERIOR DESIGN	JF4 - PWR ADJ BRAKE & ACCEL. PEDALS
J65 - BRAKES, 4-WHEEL DISC	KG7 - GENERATOR 125 AMP
LX9 - ENGINE, 3.5L V6 SFI	MN5 - TRANSMISSION 4SPEED
MX0 - AUTOMATIC TRANSMISSION	NT7 - FED EMIS SYS, TIER 2
N45 - STEERING WHEEL 3 SPOKES	ORN - ORION ASSY
PCI - DRIVER'S PACKAGE INCLUDES: * PWR ADJ BRAKE & ACCEL. PEDALS * FLOOR MATS, CARPET * CARGO NET * (4) 16" PAINTED ALLOY WHEELS	PDD - CONVENIENCE PACKAGE INCLUDES: * POWER ADJ BRAKES & ACCEL. PEDALS * FLOOR MATS, CARPET * CARGO NET
PF9 - (4) WHEELS, 16" PAINTED ALLOY	QPE - (4) P215/60/16 TOURING TIRES
R6F - IDENTIFY B CODE USERS	R6P - PREMIUM PAINT
R9C - ALLOW NON RETAIL REQ. FOR FLEET	T43 - SPOILER
UZ6 - 6 SPEAKER SOUND SYSTEM	U1C - AM/FM CD STEREO W/CLOCK & DRIVER INFORMATION CENTER
U77 - REAR WINDOW ANTENNA	VK3 - LICENSE PLATE BRACKET, FRONT

VM3 - BUMPER STD IMPACT 5 MPH FRT &RR	VN9 - DAILY RENTAL REPURCHASE PROGRAM
V2G - CREDIT IN LIEU OF FUEL	V73 - VEHICLE CERTIFICATION U.S.
1SZ - OPTION PACKAGE DISCOUNT	15U - SEDONA BEIGE METALLIC
6AR - COMPUTER SELECTED SUSPENSION	7AR - COMPUTER SELECTED SUSPENSION
70B - LIGHT TAUPE	70I - TRIM, LIGHT TAUPE
8AB - COMPONENT RR LH COMPUT SEL SUS	9AB - COMPONENT RR RH COMPUT SEL SUS

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ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Sheryl Mackin
Claims Administrator

March 20, 2008

[redacted]
La Vergne, TN[redacted]

RE: Claimant: [redacted]
Our File No.: 645213
Our Client: General Motors Corporation
Date/Event: 02/28/2008
Subject vehicle: 2006 Pontiac G6
VIN: 1G2ZG558264[redacted]

Dear [redacted]

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors. Your correspondence alleges that you sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

**** IF AN INSURANCE COMPANY OR AN ATTORNEY IS REPRESENTING YOU, PLEASE FORWARD THIS LETTER TO THE APPROPRIATE PARTY FOR FURTHER HANDLING****

1. Please provide a **copy** of your expert report and **color copies** of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents.
If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage **estimate** and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Sheryl Mackin
Claims Administrator

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ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Sheryl Mackin
Claims Administrator

June 11, 2008

[redacted]
La Vergne, TN [redacted]

RE:	Claimant:	[redacted]
	Our File No.:	645213
	Our Client:	General Motors Corporation
	Date/Event:	02/28/2008
	Subject vehicle:	2006 Pontiac G6
	VIN:	1G2ZG558264 [redacted]

Dear [redacted]

This will have reference to the above product liability claim that you filed with General Motors Corporation.

I have thoroughly reviewed the documentation provided to date in support of your claim. However, our file reflects that we have not been provided with your specific technical documentation, which supports your theory of liability as being that of General Motors Corporation.

Correspondence that was sent to you on March 20, 2008 requested specific information, which would enable us to perform our evaluation. Unless we are provided with the requested supporting technical documentation within thirty (30) days from the date of this letter, we will be unable to take further action in this matter and I will have to close our file. Finally, if it is your intention to pursue this matter further, you will be responsible for preserving the subject vehicle and/or defective component in their immediate post loss condition.

Thank you for your time and attention in this regard.

Sincerely,

Sheryl Mackin
Claims Administrator

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Nancy Johnson
Claims Administrator

June 10, 2008

Liberty Mutual Insurance Company
26 Nesbitt Road Suite 2
New Castle, PA 16105

Linda Owens:

RE: Claimant: [redacted]
Our File No.: 650661
Our Client: General Motors Corporation
Date/Event: 11/4/2007
Vehicle: 2006 Pontiac G6
VIN: 1G2ZF55B264[redacted]

Dear [redacted]

ESIS is the third party claim administrator on behalf of General Motors for matters involving product liability.

This letter is to advise you that your client's claim is being forwarded to the Field Performance Assessment Department of General Motors to be evaluated.

If you have questions, please contact me at the number above. Thanks for your cooperation in this matter.

Sincerely,

Nancy Johnson
Claims Administrator

Service Request Detail

SR No.	71-616995763	Ref No.		Goodwill	No Goodwill Offered	BRC Type	PAR
Account	[redacted]	Site		GW SubType		Bus. Unit	BRC
Last Name		First Name	[redacted]	Approval	Not Initiated	Area	PAR
Daytime #		Evening #	[redacted]	UCC	Steering - Column / Ignition Lock /	Sub-Area	Initiate PAR- Injury
Address	[redacted]	City	Tallahassee	Involved Dlr	Champion Chevrolet, Inc.	Safety	Yes
State	FL ZipCd	Con Acct		Source	Phone	Updated	4/8/2008 05:00:55 PM
Serial #VIN	1G1ZT58N17F[redacted]	Model Year	2007	Priority	Medium License #	Owner	TOLBERWH
Make	Chevrolet	Warr. Start	10/31/2006	Status	Open	Opened	4/3/2008 12:01:11 PM
Model	Malibu	Mileage		Sub-Status	Satisfied	Closed	
Abstract	Collison						
Customer Description	This is a Brc Par case**DO NOT ASSUME**Please foward all inquires to Whitney Tolbert ext 11271						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Owner	4/2/2008 11:30:00 AM	Y	0	2	Asphalt	Dry		

Driver Last Name	Driver First Name	Height	DOB	Disabilities
[redacted]		5'3	[redacted]	Yes

Insurance Agent First Name	Phone #	Insurance Agency
	(800) 947-AUTO	Geico.

Incident Loc	Capital Circle	Incident Desc	I turned at the yeild sign and the wheel yanked and the car went across the median and we lost control.
Component	N/A		
Vehicle Loc	At Dealer	Damage Desc	No Damage, but cust needs surgery on shoulder as a result of incident.
Emgcy Svc Names		Add'l Info	
		Maint Loc	Champion Chevrolet

PAR Detail

Collision		Non Collision	Y	Property Damage	N	Thermal Evt	N	Spec Equip	nothing added		
Vehicle Speed	20			Weather Condition	warm dry weather			Prop Owner	n/a	Property Type	n/a
Last Service Date				Loc Last Service				Property Location	n/a	Prop Est Repair Cost	
Veh Est Repair Cost				Spec Equip Installer				Prop Damage Description	NO PROPERTY DAMAGE		
Primary Veh Use	Personal			Inspection Type				Inspected By	Inspection Not Performed	Inspection Date/Time	
Veh Damage Description	no damage							Explain Other	sent to ESIS		

Service Request Detail

PAR Injuries

Last Name	First Name	DOB	Location	Phone #	Seating Pos	Restraint Type
[redacted]			Occupant of Owner's Vehicle	[redacted]	Driver	Seat belt

Injury Description	Medical Rpt#	Treatment Location	Treated By
Shoulder needs Surgery		Tallahassee Community Hospital	Dr Zunera Yaqub

Street Address	City	State	Zip Code
[redacted]	Tallahassee	FL	[redacted]

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/9/2008 03:29:51 PM	TOLBERWH	TOLBERWH	Inbound Call Dealer	Complex Request	Done	4/9/2008 03:35:58 PM	Champion Chevrolet Service Manager Lamar Thomas

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Service Manager Lamar Thomas

Dir sts that cust came in with the vehicle and said that the steerind was defective but it wasn't wrecked. She says that she caused a collision so we tested the vehicle and we found nothign wrong. I test drove it myself and found nothign wrong. She just bought the car a month ago but she doesn't want it anymore. She came and took everything off of the car and she wants her money back. We did find history codes and called TAC but they told us to have her call GM and make you aware of it.

Crs adv that the customer's case will go to ESIS because of the injury and that someone will call her in 7-10 business days. Crs adv that the cust did mention not wanting the vehicle anymore and asked if we could help her out of the payments. Crs adv that she told customer that she would have to call the person that she financed the vehicle through becase we couldn't stop payments on it

Whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/9/2008 12:41:56 PM	TOLBERWH	TOLBERWH	Scheduled Follow-up		Scheduled Alarm		see if case has been assumed

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/9/2008 12:41:16 PM	TOLBERWH	TOLBERWH	BRC PAR	ESIS- Injuries	Done	4/9/2008 12:41:56 PM	Sent to ESIS for Injuries

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Customer was in a collision and recived and injury.

Whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/9/2008 12:40:55 PM	TOLBERWH	ESISBIQU	Escalation	ESIS - Injuries	In Progress		Assigned to ESIS

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/8/2008 10:02:02 AM	TOLBERWH	TOLBERWH	Ownership Changed	Ownership Escalated to BRC	Done	4/8/2008 10:02:02 AM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:58 PM	DRAHEICM	TOLBERWH	Ownership Changed		Done	4/7/2008 12:48:58 PM	Service Request Ownership has changed FROM: AYRESMA TO: TOLBERWH

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:43 PM	DRAHEICM	TOLBERWH	BRC PAR	Initial Contact- Phone	Done	4/8/2008 10:19:55 AM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Cust sts that she was turning @ a yeild sign and that the steering wheel locked up caused her to have an injury. Cust has a torn should and needs surgery. Cust sts that the vehicle is @ the dlr and that she would like to have her bank contacted and wants GM to stop the payments.

Crs adv that the case will be going to the central claims department and that someone will be in contact in 7-10 business days.

Cust sts that she doesn't agree with that time frame and that she will be contacting an attorney

Crs adv that the case willbe sent over to ESIS an that someone will be in contact

whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:37 PM	DRAHEICM	TOLBERWH	BRC PAR	Initial Contact- Dealer	Done	4/9/2008 12:38:33 PM	Champion Chevrolet, Inc. (850) 576-4000

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Crs left message for Service Manager Lamar Thomas

Crs adv that the customer was in a collision and feels that it was caused by the steering. wondering if you knew anything about this, if so please give me a call back @ 866-790-5600 ext 11271

Whitneytolbert/atx/par 11271

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:32 PM	DRAHEICM	TOLBERWH	BRC PAR	Initial Contact- AVM	Done	4/9/2008 12:36:05 PM	called FAVM Jordan Randall Randy 404082 8136 CHAMPION CHEVROLET, INC. TALLAHASSEE FL

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

FAVM Jordan Randall Randy 404082 8136

SR#:71-616995763
Cust: Christine Hogan
Vehicle: 2007 Chevrolet Malibu
Vin:7F183758

Cust alleges that the steering wheel locked up and caused her to recieve a shoulder injury. This is just an FYI call to let you know that the case will be sent to ESIS but if there is anything that you would like to know about the case, please give me a callback @ 866-790-5600 ext 11271

Whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:27 PM	DRAHEICM	TOLBERWH	BRC PAR	Acknowledgement	Done	4/8/2008 10:07:25 AM	called (850) 877-2052

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Cra made contact , please see initial

whitneytolbert/atx/par 11271

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:23 PM	DRAHEICM	TOLBERWH	Notify CRM		Done	4/8/2008 05:01:18 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:19 PM	DRAHEICM	TOLBERWH	Research		Done	4/8/2008 05:01:13 PM	research vin

Name	Account	BAC Code
[redacted]		

Comments

>1 repair related to allegation: 03/18/2008 010018 # E9448 - REPOSITION I-SHAFT TO CORRECT NOISE 29271 miles
>No recalls related to allegation
>NO SR's related to allegation

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 12:48:01 PM	DRAHEICM	TOLBERWH	BRC PAR	Case Assigned	Done	4/8/2008 04:59:43 PM	assigned to whitney tolbert ext 11271

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 11:36:15 AM	VENNEJE	BRCPARQ	Escalation	Initiate PAR	Done	4/7/2008 12:47:59 PM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 11:27:32 AM	VENNEJE	VENNEJE	Inbound Call Customer	Complex Request	Done	4/7/2008 11:36:14 AM	calling for update

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Cust sts: That she wants to talk to someone about her case she was supposed to get a callback within 48 hrs last week but no one called.

CRS ADV: That I will re-escalate this to the product allegation dept. Someone will contact u within 48hrs.

Cust sts: That's what they said last time I need help now I want to talk to ur supervisor.

Put customer on hold to get supervisor then they hung up.

Jeffrey Venne/Chatham/Tier 1

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/7/2008 10:48:08 AM	NOLASCE1	AYRESMA	Notify CRM	Customer Called	Done	4/7/2008 11:29:06 AM	***assisting only***

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/4/2008 10:15:53 AM	DRAHEICM	AYRESMA	SR Opened		Done	4/4/2008 10:15:53 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/4/2008 10:15:51 AM	DRAHEICM	AYRESMA	SR Closed - Satisfied		Done	4/4/2008 10:15:51 AM	Service Request has been Closed Satisfied.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/3/2008 01:12:09 PM	AYRESMA	KINZERTH	Escalation	Initiate PAR	Done	4/4/2008 10:15:47 AM	Assigning activity to PAR QUEUE.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days.

Received and assigned in PAR
Thaddeus Kinzer/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
4/3/2008 12:22:26 PM	AYRESMA	AYRESMA	Inbound Call Customer	Complex Request	Done	4/3/2008 12:45:02 PM	Alleged product allegation-Injury.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Cust Sts: I bought this vehicle and I felt there was something wrong with it, and I was driveing and was mergeing after a yield sighn when the wheel locked and we went across the Median. And I went to the emergency dept and they said I am going to need surgery on my shoulder and I feel that the dealer knew there was a problem with the car when they sold it to me but everytime I went to them they said it was fine.

CRS Adv: Your information will now be forwarded to the Product Allegation Department within the BRC

MATTHEW AYERS/T1/STJ

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M41	Inoperative	Steering - Column / Ignition Lock / Parts

GM Vehicle Inquiry System
Summary

[redacted]

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZT58N17F[redacted]

VEHICLE INFORMATION

Merchandising Model :	1ZT69 -2007 MALIBU SEDAN 2LT	Warranty Start Date :	10/31/2006
BARS Order Type :	50 - FLEET		
Delivering Dealer :	PROSPECT MTRS/VANGUARD OUT OF STATE 6929 N LAKEWOOD AVE SUITE 100 TULSA , OK 74117-1824	Selling Source :	13 - CHEVROLET
		Site Code :	38111
		Business Associate Code :	112174

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Vehicle Has No Current Record Of Outstanding Campaigns

SERVICE INFORMATIONAL ITEMS

Type	Number	Description	Posted Date	Status
EI	07034	P0128 P0117 P0118, LOSS OF COOLANT, INSUFFICIENT HEAT REF TSB 07-06-02-001	01/30/2007	See Bulletin

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	10/31/2006	10 miles	10/31/2009	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	10/31/2006	10 miles	10/31/2012	100010 miles
39/39000 GM CERTIFIED USED LIMITED WARRANTY	10/31/2006	10 miles	01/31/2010	39010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	10/31/2006	10 miles	10/31/2014	80010 miles
60/100000 POWERTRAIN COVERAGE LIMITED WARRANTY	10/31/2006	10 miles	10/31/2011	100010 miles

36/36000 FEDERAL EMISSION	10/31/2006	10 miles	10/31/2009	36010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
03/18/2008	010018	#	E9448 - REPOSITION I-SHAFT TO CORRECT NOISE	29271 miles
03/12/2008	009697	#	C2205 - COVER OR PLATE, INSTRUMENT TRIM PANEL ACCESSORY - REPLACE	29148 miles
10/19/2007	279518	#	N0761 - BULBS, STOP, TAIL, AND TURN LAMP (LEFT) - REPLACE	24332 miles
10/30/2006	A83758	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System
Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZT58N17F[redacted]

CLAIM HISTORY

Repair Order Date :	03/18/2008	Repair Order Number :	010018	Odometer Reading :	29271 miles

Serviced By :	CHAMPION CHEVROLET, INC. PO BOX 2154 TALLAHASSEE, FL 32316-2154 (850) 576-4000	Selling Source :	13 - CHEVROLET
		Site Code :	26497
		Business Associate Code :	114693

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
03/25/2008	885	01	#	E9448 - REPOSITION I-SHAFT TO CORRECT NOISE	N/A	N/A	N/A	$ 23.50	N

Repair Order Date :	03/12/2008	Repair Order Number :	009697	Odometer Reading :	29148 miles

Serviced By :	CHAMPION CHEVROLET, INC. PO BOX 2154 TALLAHASSEE, FL 32316-2154 (850) 576-4000	Selling Source :	13 - CHEVROLET
		Site Code :	26497
		Business Associate Code :	114693

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
03/18/2008	883	01	#	C2205 - COVER OR PLATE, INSTRUMENT TRIM PANEL ACCESSORY - REPLACE	15276350 - PLATE	N/A	N/A	$ 140.00	N

Repair Order Date :	10/19/2007	Repair Order Number :	279518	Odometer Reading :	24332 miles

Serviced By :	NATIONAL/ALAMO CAR RENTAL 6929 N. LAKEWOOD AVE. SUITE 100 TULSA, OK 74117-1824	Selling Source :	13 - CHEVROLET
		Site Code :	99877
		Business Associate Code :	127067

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments

10/26/2007	842	01	#	N0761 - BULBS, STOP, TAIL, AND TURN LAMP (LEFT) - REPLACE	N/A	N/A	N/A	$ 22.12	N

Repair Order Date :	10/30/2006	Repair Order Number :	A83758	Odometer Reading :	0 miles

Serviced By :	NATIONAL/ALAMO CAR RENTAL 6929 N LAKEWOOD AVE SUITE 100 TULSA, OK 74117-1824	Selling Source :	13 - CHEVROLET
		Site Code :	97297
		Business Associate Code :	160024

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
11/03/2006	740	01	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	N/A	N/A	N/A	$ 82.73	N

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System
Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN	1G1ZT58N17F[redacted]

VEHICLE BUILD

Merchandising Model :	1ZT69 -2007 MALIBU SEDAN 2LT		
Gross Vehicle Weight Rating :	1947 kg (4293 lb)	Order Number :	KJXFTM
Build Date :	10/30/2006	Build Plant :	17FZ

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AG1 - DRIVER SEAT 6-WAY POWER	AL0 - SENSOR INDICATOR
AP9 - CARGO CONVENIENCE NETS	AT8 - RESTRAINT, CHILD RR SEAT
AY1 - AIR BAGS, DUAL FRONTAL, PASSENGERS SENSING SYSTEM HEAD CURTAIN SIDE AIR BAGS, FRONT/OUTBOARD REAR	A51 - SEATS, CUSTOM
B37 - FLOOR MATS	B8S - GM PRODUCTION WEEK #43
C60 - AIR CONDITIONING	DL6 - POWER O/S MIRRORS, BODY COLOR
FAI - FAIRFAX	FE0 - SUSPENSION SYSTEM-ACTIVE
FE9 - FEDERAL EMISSIONS	FLT - FLEET PROCESSING OPTION
F83 - TRANSAXLE 3.05 RATIO	GME - ORNAMENTATION, GM MARK OF EXEL.
IBC - INTERIOR TRIM	JL9 - 4-WHEEL ANTI-LOCK DISC BRAKES W/TRACTION CONTROL
KA1 - HEATED FRONT SEATS	KCV - VANGUARD RAC
K64 - GENERATOR 115 AMPS	LZ4 - ENGINE, 3.5L V6 SFI
MN5 - 4-SPEED AUTO TRANSMISSION	NR0 - LEATHER WRAPPED STEERING WHL
NT7 - EMISSION SYSTEM FEDERAL, TIER 2	NW7 - ELECTRONIC TRACTION CONTROL
NZ6 - (4) 16" WHEELS W/SILVER PAINTED COVERS	PCY - FRONT SEATING PACKAGE: *HEATED FRONT SEATS *DRIVER SEAT 6-WAY POWER
QPE - (4) TOURING TIRES P215/60R16	R6F - IDENTIFY B-CODE USERS
R6K	R6P - SPECIAL PAINT
R9N - LEATHER TRIM OPTION CODE	T43 - REAR SPOILER

UK3 - STEERING WHEEL CONTROLS	UN0 - AM/FM STEREO W/CD & RDS (REPLACES STD/OPT/PKG RADIO)
UZ6 - SIX PREMIUM SPEAKERS	U2J - DELETE XM SATELLITE RADIO
U77 - ANTENNA RR WINDOW	VH3 - NOTICE TO BUYER LABEL - 5 MPH BUMPER IMPACT, HAWAII
VK3 - FRONT LICENSE PLATE BRACKET	VN9 - DAILY RENTAL REPURCHASE PROGRAM
VY7 - LEATHER SHIFT KNOB	V2G - FULL FUEL FILL CREDIT
V73 - STATEMENT OF VEHICLE CERT.- U.S. /CANADA	1SZ - OPTION PACKAGE DISCOUNT
2LT - 2LT PACKAGE	6AR - FRONT SPRING
7AR - FRONT SPRING	75U - DARK GRAY METALLIC
8AB - REAR SPRING	83C - TITANIUM
831 - INTERIOR TRIM	9AB - REAR SPRING

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5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 tel
313.665.0911 fax

Susan Braun
Claim Administrator

May 20, 2008

[redacted]
Tallahassee, FL [redacted]

RE: Claimant: [redacted]
Our File No.: 651782
Our Client: General Motors Corporation
Date/Event: 04.02.2008
Subject vehicle: 2007 Chevrolet Malibu
VIN: 1G1ZT58N17F[redacted]

Dear [redacted]:

This will confirm our conversation on April 16, 2008 wherein we discussed the above matter involving the incident you with the 2006 Chevrolet Malibu. It was explained that while you were attempting to make a right turn, the subject vehicle steering 'locked up' and caused you to drive the Malibu onto the median. During the incident it was stated that you sustained a shoulder injury. Please be advised that ESIS provides administrative claims handling services to General Motors Corporation in connection with product liability claims against GM. They have referred your claim to our office for further handling.

Please be advised that Ryan Jahr, an ESIS Field Investigator will be contacting you to schedule an interview with you. He will also photograph the 2007 Malibu. Additionally, I have enclosed a Medical Authorization for you to complete and return to my attention.

Lastly, all attempts should be made to keep the subject vehicle and its related components in their immediate post-collision condition for as long as a claim is being pursued. If there are any alterations, modifications, repairs, or destructive inspections or testing conducted on the subject vehicle or it's related components, spoliation of evidence may occur and a denial of said claim may result.

I look forward to working with you. Should you have any questions or concerns regarding this letter, please feel free to contact me at (800) 888-0164, Monday through Friday, 8:00 AM to 4:00 PM, EST.

Sincerely,

Susan Braun

CHAMPION CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA RAISOR	Tag: 1214	License: FL	1G1ZT58N1 7F[redacted]	Page: 1	Invoice: C11002

Invoice to

[redacted]
TALLAHASSEE, FL [redacted]
Work [redacted] Home: [redacted]

Driver/Owner Information

[redacted]
TALLAHASSEE FL [redacted]
Work: [redacted] Home: [redacted]

For Office Use

Odometer In: 29424 Out: 29429 | Dist: CHV CUS C | Prelim

Vehicle Information

07 CHEVROLET MALIBU LT 4DR SDN GRAY

Stock#: OR[redacted]

Begin: 04/02/08 | Done: 04/02/08 | Invoiced: 04/02/08 15:54 LT | Inservice: 10/31/06 | Sold: 02/29/08

Customer Concern

		Operation	Tech	Amount
Concern 51	CUSTOMER STATES WHEN TURN RIGHT STEERING IS LOCKING UP & HARD TO RETURN			
Cause	DTC'S C0896,899,900 HISTORY CODES	NC	491	0.00
Correction	NO CHARGE,COULD NOT DUPLICATE CONCERN,TECH CASE #1C225934 [redacted] CUSTOMER NEEDS TO CONTACT CUSTOMER ASSISTANCE 81-800-222-1020,THEY WILL CONTACT PRODUCT ALIGATION GROUP,NO REPAIRS TO BE DONE AT THIS TIME Tech 491 THOMLEY, JARED			
Type: C		TOTAL CHARGE FOR CONCERN		0.00

		Operation	Tech	Amount
Concern 52	CUSTOMER STATES POPPING NOISE ON TURNS			
Cause	COULD NOT DUPLICATE	NC	491	0.00
Correction	NO CHARGE Tech 491 THOMLEY, JARED			
Type: C		TOTAL CHARGE FOR CONCERN		0.00

Summary of Charges for Invoice C11002

TOTAL CHARGE 0.00

Payment Distribution for Invoice C11002

CASH 0.00
TOTAL CHARGE 0.00

If you have any questions - please see LISA RAISOR
THIS CHARGE REPRESENTS COSTS AND PROFITS TO THE MOTOR REPAIR FACILITY FOR MISCELLANEOUS SHOP SUPPLIES OR WASTE DISPOSAL.[S.559.904(4)]
THE STATE OF FLORIDA REQUIRES A $1.00 FEE TO BE COLLECTED FOR EACH NEW TIRE SOLD IN THE STATE[S.403.718],AND A $1.50 FEE TO BE COLLECTED FOR EACH NEW OR REMANUFACTURED BATTERY SOLD IN THE STATE [S.403.7185].

Last Page

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

UCS02004

FILE

CHAMPION CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA RAISOR	Tag: 6326	License: FL	1C1ZT58N17[redacted]	Page: 1	Invoice: W09697

Invoice to	Driver/Owner Information
[redacted] TALLAHASSEE, FL Work: [redacted] Home: [redacted]	[redacted] TALLAHASSEE, FL Work: [redacted] Home: [redacted]

For Office Use			Vehicle Information	
Odometer In: 29148 Out:		Dist: CHV WAR H Prelim	07 CHEVROLET MALIBU LT 4DR SDN GRAY	
	MFG: 37C001		Stock#: OR[redacted]	
Begin: 03/12/08	Done: 03/12/08	Invoiced: 03/12/08 14:34 LR	Inservice: 10/31/06	Sold: 02/29/08

Customer Waiting

		Operation	Tech	Units	Amount
Concern 51	CUSTOMER STATES CENTER VENTS NOT WORKING (PART IN)				
Cause	VERIFIED CUSTOMER COMPLAINT AND FOUND THAT CENTER STACK PANEL NEEDS TO BE REPLACED	C2205	310	0.5	38.00
Correction	REPLACED CENTER STACK PANEL, VENTS WORKING AT THIS TIME				
Parts	Part Number / PO# / Note / Description	Qty		Sell	
	000 015276350 / PLATE	1		100.83	100.83
	Parts: Count 1.00 Allowance: 28.81				
	Tech 310 PINNOCK, KENNET				
	COND CODE : OJ				
	FAIL CODE : 1D				
	FP- 015276350				
Type: W		TOTAL CHARGE FOR CONCERN			138.83

Summary of Charges for Invoice W09697		Payment Distribution for Invoice W09697	
PARTS	100.83	TOTAL CHARGE	138.83
LAB-MECHANICAL	38.00		
TOTAL CHARGE	138.83	WARRANTY	138.83
		Customer Waiting	

Future Reservations

TUESDAY, 03/18/08 at 09:00 for CUSTOMER STATES WHEN BACKING UP & TURNING POPPING NOISE OCCURS & SQUEEKS

If you have any questions - please see LISA RAISOR
IN ORDER FOR CHAMPION TO BE #1 IN TALLAHASSEE,
WE WOULD APPRECIATE YOU SENDING IN ALL SURVEYS

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

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OCSQ2004

FILE

CHAMPION
CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA ERISOR	Tag: 6326	License: FL	1G1ZT58N1 7F[redacted]	Page: 2	Invoice: W09697

Invoice to: ROGAN, CHRISTINE	Driver/Owner: ROGAN, CHRISTINE
Invoiced: 03/12/08 14:34:54 LR	07 CHEVROLET MALIBU LT 4DR SDN GRAY

THAT YOU RECEIVE FROM GM. Last Page

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

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FILE

CHAMPION
CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA RAISOR	Tag: 6959	License: FL	1G1ZT58N1 7F[redacted]	Page: 1	Invoice: W10018

Invoice to	Driver/Owner Information
[redacted] TALLAHASSEE, FL [redacted] Work: [redacted] Home [redacted]	[redacted] TALLAHASSEE, FL [redacted] Work: [redacted] Home: [redacted]

For Office Use			Vehicle Information	
Odometer In: 29271 Out:		Dist: CHV WAR W Prelim	07 CHEVROLET MALIBU LT 4DR SDN GRAY	
	MFC: 370001		Stock#: OR[redacted]	
Begin: 03/18/08	Done: 03/18/08	Invoiced: 03/18/08 10:22 LR	Inservice: 10/31/06	Sold: 02/29/08

Customer Concern

		Operation	Tech	Units	Amount
Concern 51	CUSTOMER STATES WHEN BACKING UP & TURNING POPPING NOISE OCCURS & SQUEEKS ESPECIALLY ON LEFT TURNS (WAS TOLD ELSEWHERE TIE ROD)				
Cause	TEST DROVE VEHICLE AND VERIFIED CUSTOEMR COMPLAINT, UPON INSPECTION FOUND INTERMEDIATE SHAFT CAUSING POPPING NOISE.	E9448	389	0.3	22.80
Correction	LUBED AND REPOSITIONED INTERMEDIATE SHAFT PER TSB# 06-02-32-007B. TEST DROVE VEHICLE TO VERIFY CORRECTION. NO OTHER NOISE AT THIS TIME Tech 389 CHILDERS JR., J COND CODE : AP FAIL CODE : 93				
Type: W		TOTAL CHARGE FOR CONCERN			22.80

Summary of Charges for Invoice W10018		Payment Distribution for Invoice W10018	
LAB-MECHANICAL	22.80	TOTAL CHARGE	22.80
TOTAL CHARGE	22.80	WARRANTY	22.80

If you have any questions - please see LISA RAISOR
IN ORDER FOR CHAMPION TO BE #1 IN TALLAHASSEE.
WE WOULD APPRECIATE YOU SENDING IN ALL SURVEYS
THAT YOU RECEIVE FROM GM.

Last Page

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X

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UCSO2004

FILE

Adv: 369 GEORGE BELL	Tag: 4223	License:	1G1ZT58N1 7F[redacted]	Page: 1	Invoice: L08170

Invoice to	Driver/Owner Information
OR183758	OR[redacted]

For Office Use	Vehicle Information
Odometer In: 28907 Out: 28910 Dist: CHV SCI L Prelim	07 CHEVROLET MALIBU LT 4DR SDN GRAY
	Stock#: OR[redacted] Inv Acct: 240
Invoiced: 02/19/06 17:15 GB	Inservice: 10/31/06

Customer Concern

Concern +02 Correction Type: IS	VIBRATION AT SPEED COMPLETED ROTATION AND COMPUTER WHEEL BALANCE Tech 392 SANGSTER, JEREM	Operation	Tech	Units		Amount
		RB	392	1.0	*	44.95
		TOTAL CHARGE FOR CONCERN				44.95
Concern 24 Cause Correction Type: IS	PERFORM USED VEHICLE DETAIL MARCUS PERFORMED USED VEHICLE DETAIL Tech 099 SUBLET, TECH	Operation	Tech	Units		Amount
		UCFD	099	3.0	*	130.00
		TOTAL CHARGE FOR CONCERN				130.00
Concern +25 Correction Parts Type: IS	OIL CHANGE ADD ON PERFORMED OIL CHANGE Part Number / PO# / Note / Description 000 XITPX61 / OIL & FILTER 000 089017342 / PF61 / FILTER 000 12345621B / GOG / GWRENCH 10W30 Tech 392 SANGSTER, JEREM	Operation	Tech	Units		Amount
		LOFI	392	1.0	*	29.95
		Qty			Sell	
		1			**.00	**.00
		1 B			4.84	4.84
		6 B			2.45	14.70
		TOTAL CHARGE FOR CONCERN				49.49
Concern 50 Correction Comment Type: IS	USED CAR INSPECTION USED CAR INSPECTION CERT #1647527 Tech 392 SANGSTER, JEREM	Operation	Tech	Units		Amount
		UCI	392	1.5		119.95
		TOTAL CHARGE FOR CONCERN				119.95
Concern +51 Correction	BRAKES PULSATE WHEN APPLIED TRUED FRT ROTORS	Operation	Tech	Units		Amount
		TRUE	392	2.0	S	100.95

Adv: 369 GEORGE BELL	Tag: 4223	License:	1G1ZT58N1 7E[redacted]	Page: 2	Invoice: L08170

Invoice to: 0R183758	Driver/Owner: 0R183758
Invoiced: 02/19/08 17:15:45 GB	07 CHEVROLET MALIBU LT 4DR SDN GRAY

Type: IS	Tech 392 SANGSTER, JEREM	TOTAL CHARGE FOR CONCERN 100.95
Concern +52 Correction Type: IS	REAR SEAT CUSHION LEFT LOOSE SECURED REAR SEAT ASSY;S Tech 392 SANGSTER, JEREM	Operation Tech Units Amount SECURE 392 0.5 36.95 TOTAL CHARGE FOR CONCERN 36.95

Summary of Charges for Invoice L08170		Payment Distribution for Invoice L08170	
PARTS	4.84	TOTAL CHARGE	503.39
GAS-OIL-GREASE	14.70		
SUPPLIES	20.00	INTERNAL	503.39
LAB-MECHANICAL	462.75		
SUB-TOTAL	502.29		
FLORIDA STATE TAX	0.88		
FLORIDA COUNTY TAX	0.22		
TOTAL CHARGE	503.39		

If you have any questions - please see GEORGE BELL
580-576-4000

Last Page

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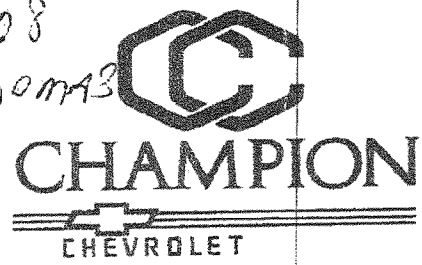
CUSTOMER

Finaled 5/14/08
per LAMAR THOMAS



CHAMPION
CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

FAX
4-16-08

File #651782
SUSAN BRAUN

313-665-0911

Adv: 907 LISA RAISOR	Tag: 1214	License: FL	1G1ZT58N1 7F[redacted]	Page: 1	Invoice: C11002

Invoice to

[redacted]
TALLAHASSEE, FL [redacted]
Work [redacted] Home [redacted]

Driver/Owner Information

[redacted]
TALLAHASSEE, FL [redacted]
Work: [redacted] Home: [redacted]

For Office Use

Odometer in: 29424 Out: 29429 | Dist: CHV CUS C | Prelim

Begin: 04/02/08 | Done: 04/02/08 | Invoiced: 04/02/08 15:54 LT

Vehicle Information

07 CHEVROLET MALIBU LT 4DR SDN GRAY

Stock#: OR[redacted]

Inservice: 10/31/06 | Sold: 02/29/08

Customer Concern

Concern 51	CUSTOMER STATES WHEN TURN RIGHT STEERING IS LOCKING UP & HARD TO RETURN	Operation	Tech	Amount
Cause	DTC'S C0896,899,900 HISTORY CODES	NC	491	0.00
Correction	NO CHARGE,COULD NOT DUPLICATE CONCERN,TECH CASE #10225834 KEN RATCLIFF,CUSTOMER NEEDS TO CONTACT CUSTOMER ASSISTANCE @1-800-222-1020,THEY WILL CONTACT PRODUCT ALIGATION GROUP,NO REPAIRS TO BE DONE AT THIS TIME			
Type: C	Tech 491 THOMLEY, JARED	TOTAL CHARGE FOR CONCERN		0.00
Concern 52	CUSTOMER STATES POPPING NOISE ON TURNS	Operation	Tech	Amount
Cause	COULD NOT DUPLICATE	NC	491	0.00
Correction	NO CHARGE			
Type: C	Tech 491 THOMLEY, JARED	TOTAL CHARGE FOR CONCERN		0.00

Summary of Charges for Invoice C11002		Payment Distribution for Invoice C11002	
TOTAL CHARGE	0.00	CASH	0.00
		TOTAL CHARGE	0.00

If you have any questions - please see LISA RAISOR
THIS CHARGE REPRESENTS COSTS AND PROFITS TO THE MOTOR REPAIR FACILITY
FOR MISCELLANEOUS SHOP SUPPLIES OR WASTE DISPOSAL.[S.559.904(4)]
THE STATE OF FLORIDA REQUIRES A $1.00 FEE TO BE COLLECTED FOR EACH
NEW TIRE SOLD IN THE STATE[S.403.718],AND A $1.50 FEE TO BE COLLECTED
FOR EACH NEW OR REMANUFACTURED BATTERY SOLD IN THE STATE [S.403.7185].

Last Page

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X

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

CUSTOMER

ON LINE SERVICE INVOICING BY UCS ©1979 TO REORDER FORMS OR SUPPLIES CALL 1-800-869-6348 EXT. 6214 98429 F

UCS02004

CHEVROLET

CHAMPION CHEVROLET

CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

INSTRUCTIONS ON WORK TO BE DONE

51* PAY TYPE: W
CUSTOMER STATES WHEN TURN RIGHT STEERING
IS LOCKING UP & HARD TO RETURN
Could not duplicate concern at this time, road tested
5 miles. History DTCs stored dec Id # 15166688.
DTCs C0896, C0899, C0900 all History codes, no current
52 PAY TYPE: W
CUSTOMER STATES POPPING NOISE ON TURNS
NO Noise heard @ this time

Talked with "Whitney" @ the product alignment group on 4-9-08 (1:45). Will be in touch in 7 to 10 days with Customer about her shoulder injury. WLT

RO 11002 *TAG 1214* LIC: FL FL SVC ADV: 907 LISA RAISOR
[redacted]
07 **VIN: 1G1ZT58N1 7F[redacted]*
CHEVROLET MALIBU
LT 4DR SDN
LICENSE: FL FL GRAY CAR
MFG CODE: 37C001 SVC DLR: 26497 SLM: 286
STOCK NUMBER: 0R183758
IN-SVC: 103106 SOLD: 022908
ODOMETER: LAST: 29271 CURRENT: 29429
AVG PER DAY: 20 PER MONTH: 600

TALLAHASSEE
FL [redacted]
LEON

WORK: [redacted]
HOME:

DIST CODE: CHV

Dec Id 15666688
C0896 History
C0899
C0900

* Customer needs to contact customer assistance per TAC. Customer does not want vehicle, left here @ champion 4-2-08 4:30. WLT

04/02/08 14:53:06

****PROMISED DATE: 04/02/08 TIME: 1800 ****

TAG 1214 **RO 11002** SVC ADV: 907 VIN: 1G1ZT58N1 7F

CHAMPION CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA RAISOR	Tag: 6559	License: FL	1G1ZT58N1 7F	Page: 1	Invoice: W10018

Invoice to	Driver/Owner Information
[redacted] TALLAHASSEE, FL Work [redacted] Home [redacted]	[redacted] TALLAHASSEE, FL Work [redacted] Home [redacted]

For Office Use	Vehicle Information
Odometer In: 29271 Out: Dist: CHV WAR W Prelim	07 CHEVROLET MALIBU LT 4DR SDN GRAY
MFG: 37C001	Stock#: GR[redacted]
Begin: 03/18/08 Done: 03/18/08 Invoiced: 03/18/08 10:22 LR	Inservice: 10/31/06 Sold: 02/29/08

Customer Concern

		Operation	Tech	Units	Amount
Concern 51	CUSTOMER STATES WHEN BACKING UP & TURNING POPPING NOISE OCCURS & SQUEEKS ESPECIALLY ON LEFT TURNS (WAS TOLD ELSEWHERE TIE ROD)				
Cause	TEST DROVE VEHICLE AND VERIFIED CUSTOMER COMPLAINT, UPON INSPECTION FOUND INTERMEDIATE SHAFT CAUSING POPPING NOISE.	E9448	389	0.3	22.80
Correction	LUBED AND REPOSITIONED INTERMEDIATE SHAFT PER TSB# 06-02-32-007B. TEST DROVE VEHICLE TO VERIFY CORRECTION. NO OTHER NOISE AT THIS TIME Tech 389 CHILDERS JR., J COND CODE : NF FAIL CODE : 93				
Type: W		TOTAL CHARGE FOR CONCERN			22.80

Summary of Charges for Invoice W10018		Payment Distribution for Invoice W10018	
LAB-MECHANICAL	22.80	TOTAL CHARGE	22.80
TOTAL CHARGE	22.80	WARRANTY	22.80

If you have any questions - please see LISA RAISOR
IN ORDER FOR CHAMPION TO BE #1 IN TALLAHASSEE.
WE WOULD APPRECIATE YOU SENDING IN ALL SURVEYS
THAT YOU RECEIVE FROM GM.

Last Page

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

UCS02004

FILE

CHAMPION CHEVROLET

3127 WEST TENNESSEE STREET
TALLAHASSEE, FLORIDA 32304
(850) 576-4000
REPAIR # MV 00121

Adv: 907 LISA RAISOR	Tag: 6326	License: FL	1G12T58N1 7F	Page: 1	Invoice: W09697

Invoice to	Driver/Owner Information
[redacted]	[redacted]
TALLAHASSEE, FL [redacted]	TALLAHASSEE, FL [redacted]
Work: [redacted] Home: [redacted]	Work: [redacted] Home: [redacted]

For Office Use			Vehicle Information	
Odometer In: 29148 Out:		Disl: CHV WAR W Prelim	07 CHEVROLET MALIBU LT 4DR SUN GRAY	
	MFG: 37C001		Stock#: 08[redacted]	
Begin: 03/12/08	Done: 03/12/08	Invoiced: 03/12/08 14:34 LR	Inservice: 10/31/06	Sold: 02/29/08

Customer Waiting

Concern 51	CUSTOMER STATES CENTER VENTS NOT WORKING (PART IN)		Operation	Tech	Units	Amount
Cause	VERIFIED CUSTOMER COMPLAINT AND FOUND THAT CENTER STACK PANEL NEEDS TO BE REPLACED		C2205	310	0.5	38.00
Correction	REPLACED CENTER STACK PANEL, VENTS WORKING AT THIS TIME					
Parts	Part Number / PO# / Note / Description		Qty		Sell	
	000 015276350 PLATE		1		100.83	100.83
	Parts Count 1.00 Allowance: 28.61					
	Tech 310 PINNOCK, KENNET					
	COND CODE : OJ					
	FAIL CODE : 1D					
	FP- 015276350					
Type: W			TOTAL CHARGE FOR CONCERN			138.83

Summary of Charges for Invoice W09697		Payment Distribution for Invoice W09697	
PARTS	100.83	TOTAL CHARGE	138.83
LAB-MECHANICAL	38.00		
TOTAL CHARGE	138.83	WARRANTY	138.83
		Customer Waiting	

Future Reservations

TUESDAY, 03/18/08 at 09:00 for CUSTOMER STATES WHEN BACKING UP & TURNING POPPING NOISE OCCURS & SQUEEKS

If you have any questions - please see LISA RAISOR
IN ORDER FOR CHAMPION TO BE #1 IN TALLAHASSEE.
WE WOULD APPRECIATE YOU SENDING IN ALL SURVEYS

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways, or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

X

I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

UC302.004

FILE

ESIS
300 Renaissance Center
Mail Code 482 C19 B61
Detroit, MI 48265

800-888-0164 tel
313-665-0911 fax
www.esis.com

Susan Braun
Claims Administrator

5

February 18, 2009

[redacted]

TALLAHASSEE, FL[redacted]

Re:	Claimant:	[redacted]
	Date of Event:	04/02/08
	Our File:	651782
	Our Client:	General Motors Corporation

Dear [redacted]

This will acknowledge my conversation with you on February 18, 2009, during which we agreed to settle the above matter for $5,000.00. The settlement breakdown is as follows:

- $500.00 cash;
- $2500.00 cash towards repayment of loan balance on subject vehicle; and
- $2000.00 GM Loyalty Certificate towards purchase of another vehicle through a GM dealer.

Prior to issuing the check and certificate, the enclosed Release needs to be signed by you in the presence of a Notary Public. Please read the Release carefully, as this will be considered the full and final settlement of any and all claims with regard to this matter.

Once I have the completed Release, a settlement check will be issued in the agreed amount of $3,000 and a $2,000.00 GM Loyalty Certificate will be sent to you.

Should you have any questions, please do not hesitate to contact me at 800.888.0164.

Thank you for your cooperation in this matter.

Sincerely,

Susan Braun

Enclosure:
Release

ESIS 800-888-0164 tel
300 Renaissance Center 313-665-0911 fax
Mail Code 482 C19 B61
Detroit, MI 48265 www.esis.com

Susan Braun
Claims Administrator

5

April 16, 2009

[redacted]
TALLAHASSEE, FL [redacted]

Re:	Claimant:	[redacted]
	Date of Event:	04/02/08
	Our File:	651782
	Our Client:	General Motors Corporation

Dear [redacted]

This will acknowledge my conversation with you on February 18, 2009, during which we agreed to settle the above matter for $8,250.00. The settlement breakdown is as follows:

- $4,250.00 cash;
- $4,000.00 cash towards repayment of loan balance on subject vehicle; and

Prior to issuing the checks, the enclosed Release needs to be signed by you in the presence of a Notary Public. Please read the Release carefully, as this will be considered the full and final settlement of any and all claims with regard to this matter.

Once I have the completed Release, the settlement checks will be sent to your attention.

Should you have any questions, please do not hesitate to contact me at 866-948-2806.

Thank you for your cooperation in this matter.

Sincerely,

Susan Braun

Enclosure:
Release

RELEASE AND INDEMNIFICATION OF ALL CLAIMS

FILE NUMBER: 8213-259-651782 Claims Administrator: Braun

KNOW ALL MEN BY THESE PRESENTS:

The undersigned, [redacted] being of lawful age, for the sole consideration of Eight Thousand two hundred fifty and NO/100 dollars, ($8,250.00 ($4,000 check to Citifinancial and [redacted] and $4,250.00 check to [redacted]) to the undersigned in hand paid, receipt whereof is hereby acknowledged, does hereby and for my heirs, executors, administrators, successors and assigns, release, acquit, and forever discharge **General Motors Corporation, ESIS Inc.**, and Champion Chevrolet dealership and all GM Dealers, and his, her, their, or its agents, servants, successors, heirs, executors, administrators and all other persons, firms, suppliers, corporations, associations or partnerships, the "Releasees", of and from any and all claims, causes of action, demands, rights, damages, costs, loss of service, expenses and compensation whatsoever, which the undersigned now has/have, or which may hereafter accrue on account of, or in any way growing out of, any and all known and unknown, foreseen and unforeseen bodily, personal injury and property damage, and the consequences thereof resulting to or resulting from the accident, casualty or event which occurred on or about the 2nd day of April, 2008, at or near Tallahassee, Florida.

It is understood and agreed that this settlement is the compromise of a doubtful and disputed claim, and that the payment made is not to be construed as an admission of liability on the part of the party or parties hereby released, and that said Releasees deny liability therefore and intend merely to avoid litigation and buy their peace.

The undersigned hereby declare(s) and represent(s) that the injuries sustained are, or may be, permanent and progressive and that recovery therefrom is uncertain and indefinite, and in making this Release, it is understood and agreed, that the undersigned relies wholly upon the undersigned's own judgment, belief and knowledge of the nature, extent, affect and duration of said injuries and liability therefore, and it is made without reliance upon any statement or representation of the party or parties hereby released, or their representatives, or by any physician or surgeon by them employed.

It is understood and agreed that this Release is intended to cover, and does cover, without limitation, claims which are known and unknown, claims for known and unknown injuries, and/or damage claims for anticipated or unanticipated injuries and/or damage; and claims for expected or unexpected consequences of injuries and/or damages, which have resulted or may result from any alleged conduct, acts, or omissions of any of the Releasees.

It is understood and agreed that the undersigned, his/her heirs, executors, administrators, and assigns does agree to indemnify, save harmless and defend the Releasees from all claims and demands for damages, costs, expense or compensation on account of, or in any way arising out of the accident, casualty or event which occurred on or about April 2, 2008, including actual damages, actual attorneys fees and all other costs arising out of claims for contribution and/or common law indemnification, and/or contractual indemnification brought against the Releasees by any person whatsoever.

It is further understood that this settlement is a confidential settlement, the terms of which will not be disclosed to any third person except as required by law.

The undersigned further declare(s) and represent(s) that no promise, inducement or agreement not herein expressed has been made to the undersigned, and that this Release contains the entire agreement between the parties hereto, and that the terms of this Release are contractual and not mere recital.

Initial: [redacted]

FILE NUMBER: 8213-259-651782

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT, IS GUILTY OF INSURANCE FRAUD.

THE UNDERSIGNED HAS READ THE FOREGOING RELEASE AND FULLY UNDERSTANDS IT.

Signed, sealed and delivered this 24th day of April, 2009.

CAUTION: READ BEFORE SIGNING

WITNESS [redacted] LS

State of FL }
}
County of Leon }

On the 24 day of April, 2009 before me personally appeared Christine Hogan to me known to be the person(s) named herein and who executed the foregoing Release and she acknowledged to me that she voluntarily executed the same.

My term expires 1/6, 2012

Notary Public

DAVIS DUGGER
Notary Public - State of Florida
My Commission Expires Jan 6, 2012
Commission # DD 746963
Bonded Through National Notary Assn.

RECEIVED
APR 2 8 2009
ESIS-GM CLAIMS UNIT

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

General Information

Incident Date & Time 4/23/2008

Owner
Title - First Name [redacted] Middle - Last Name [redacted]
Street [redacted]
City Lancaster State PA Zip [redacted] Country - Age 0
Home Phone [redacted] 0000 Work Ph. [redacted] 0000
If Company Owned - Name -

Driver
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Claimant
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Represented by Attorney? No
Attorney
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

End of General Information

RECEIVED
MAY 16 2008
ESIS-GM CLAIMS UNIT

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Vehicle Information

VIN 1G8AJ52FX5Z[redacted]
Year - Model ION New/Used/Demo USED
Transaxle AUT Engine ENGINE 4 CYL

Delivery Date 11/13/2004
Mileage 33000
License# - State -

Inspection# -
Station -
Expiration Date -

Special Equipment/Features
-

Sir Equipped Yes ABS No Traction Control No

Nature and Extent of Damages
Steering shaft locking

Est. Cost of Repairs $ 0
Source of Estimate -

Product Campaigns That Vehicle Was Subject of.
If Appropriate, Attach Copy of Campaign Bulletin.

Campaign Status	Description
-	

Tires	Size	Brand	Condition	Air/psi	Tread/32 in
Left Front	-	-	-	0	0
Comments	-				
Right Front	-	-	-	0	0
Comments	-				
Left Rear	-	-	-	0	0
Comments	-				
Right Rear	-	-	-	0	0
Comments	-				
Spare	-	-	-	0	0
Comments	-				

End of Vehicle Information

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **
Case # PLC200800190

Print Date
5/7/2008

Property Damage

Damage, Other than Owners Vehicle (Vehicle Property Yes Other Than Vehicle No)

Owner
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Driver
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Vehicle
Make/Model/Year
-
Estimate of Speed -
By Whom? -

Extent of Damage
-

Property Owner
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Kind of Damage
-
Extent of Damage
-
Additional Comments
-

End of Property Information

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Bodily Injuries

Bodily Injuries? Yes Number of People: 1

1)
Title - First Name [redacted] Middle - Last Name [redacted]
Street [redacted]
City Lancaster State PA Zip [redacted] Country USA Age -
Home Phone [redacted] 0000 Work Ph. [redacted] 0000

Location Code -
Driver's Name : -
Seating Position: Driver
Nature of Injuries:
Back and leg hurting

Where were Injuries Treated?
-
By Whom?
-

Claimant Reported: Seat Belt Usage: Yes Shoulder Belts?: No Lap?: No

End of Bodily Injuries

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Incident Information

Was Another Vehicle Involved? No Number of Vehicles 0
Did vehicle overturn? No
Where can vehicle be seen? Saturn of Lancaster
Principal use of vehicle personal

Driver Description
-

Did you speak to driver? No
If No, Give Source of Driver Desc. -

Nature of Weather Sunny

What Component(s) are Allegedly defective steering systems
Who made allegation of defect owner
Estimated Vehicle Speed 15 MPH
Source of Estimated Vehicle Speed owner

Was Vehicle towed? No
Towing Co. Name -
Towing Co. Address -
Tow Driver Name -

End of Incident Information

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Location Information

Police Report Made? No Report Attached? No
Station Making Report -

Officer
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Witness
Title - First Name - Middle - Last Name -
Street -
City - State - Zip - Country - Age -
Home Phone Work Ph.

Location of Incident
-

Kind of Road - Kind of Shoulder -
Condition of Road - Condition of Shoulder - Posted Speed 0 MPH

Visual Obstructions
-

Additional Comments
-

End of Location Information

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Retailer / Parts Detail Information

Were Photos Taken? No Number? 0
By Whom?
Title - First Name - Middle - Last Name -
Street [redacted]
City Spring Hill State TN Zip [redacted] Country USA Age 0
Home Phone Work Ph.

Vehicle Inspected No Inspector(s) Name -
CIGNA Rep. at Investigation
-

Selling Retailer SATURN OF LANCASTER
City LANCASTER State PA

Servicing Retailer SATURN OF LANCASTER
City LANCASTER State PA

Did Search of the National Service History Produce Customer Service Orders? Yes
How Many Line Items? 36

How & When was matter left with claimant?
5/6/2008
The claimant and I discussed the nature of the incident. We discussed the results of the inspection performed at the Saturn of Lancaster as well as the repairs completed. The claimant will pay her portion of the repairs to the vehicle (about 100 dollars) and return the loaner vehicle. The claimant is seeking reimbursement of the 100 dollar payment, coverage of possible medical expenses, and a consideration for replacement because of this incident. I advised the claimant we will forward the matter to our insurer, ESIS, for further handling. JAL

End of Retailer Information

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

General Comments

1-27004135 (steering systems) The claimant alleges a possible defect with the vehicle's steering systems led to bodily injury.
[redacted] owner / driver / claimant
[redacted]

Saturn of Lancaster

5/2/2008 Mel Gochenaurr (717) 560-5777 Saturn of Lancaster
Mel Gochenaurr, service manager, and I discussed the nature of the incident and the repairs performed: electric power assist steering component replaced. They will retain the parts for possible inspection in the future. I advised Mel we will forward the matter of bodily injury from the incident to our insurer, ESIS. Mel will fax the work order to my attention. JAL

5/6/2008
I received the work order by fax. JAL

5/6/2008 [redacted]
I left a message for the claimant to return my call. JAL

5/6/2008
The claimant and I discussed the nature of the incident. We discussed the results of the inspection performed at the Saturn of Lancaster as well as the repairs completed. The claimant will pay her portion of the repairs to the vehicle (about 100 dollars) and return the loaner vehicle. The claimant is seeking reimbursement of the 100 dollar payment, coverage of possible medical expenses, and a consideration for replacement because of this incident. I advised the claimant we will forward the matter to our insurer, ESIS, for further handling. JAL

End of General Comments

Saturn Product Liability
Report of Preliminary Investigation
** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Notification / Investigator Detail Information

Saturn Notified on Incident?
How? Service RequestWhen? 4/24/200
Area Assigned NE

Assignment

Investigator
First Name Josh . Middle . Last Name Lawson
Assignment Date 5/2/2008 Due Date 5/12/2008
Investigation Date - Received Date 5/2/2008

Info. from Further Investigation
-

CIGNA Office Code DETROIT, MI Date Sent -
Area Approved By - Date -
C.O.Approved By - Date -

End of Notify Information

Resolution Comments

Resolution: 1241, forwarded to CIGNA for handling

End of Resolution Comments

Saturn CAC Information
** Saturn Confidential **
Case # PLC200800190

Print Date
5/7/2008

CAC Case Information

CAMIS Case Number 27004135

Owner: [redacted]
[redacted] -
Lancaster PA [redacted]
Home Phone: [redacted]
Work Phone: [redacted]
Source: Owner
Contact: Service Request
Issue Comments:
The claimant alleges a possible defect with the vehicle's steering systems led to bodily injury
-
-
-

Vehicle: 1G8AJ52FX5Z[redacted] 2005
Mileage: 33000
Delivery: 11/13/2004
In Warranty: No
Retailer: 10406
Problems: 0 llegation GM 12T01 - Product A41

Resolution Comments:
-
-
-
-
-

Memo: No
Legal: No
Close: Yes
Corporate File: Yes
Letter: No

End of CAC Case Information

Saturn CAC Information
** Saturn Confidential **
Case # PLC200800190

Print Date
5/7/2008

CAC Legal Information

CAMIS Case Number 27004135

Legal Information I

Case Type: Product Liabili
PL Basic Info: Product Liabili
Reason:
-

Representation: No

Request: -
Vehicle Disposition: -

Legal Information II

Outcome: -
Legal Correspondence: No

PL Basic Information I

Allegation: Diving going to make right turn and the steering locked up c
Driver at time of incident: [redacted]
Vehicle Damage: Yes Description: Steering shaft locking
Property Damage: No Description: -
Date and Time of the incident: 4/23/2008

PL Basic Information II

Injuries: Yes Description: Back and leg hurtin
Additional Vehicle Involved? No Description: -
Police Report Filed? No Where? -
Where is the vehicle now? Saturn of Lancaster
Contact # for vehicle location: 71761514210000
Claimant's Permission for Investigation? No

End of CAC Legal Information

Saturn CAC Information
** Saturn Confidential **
Case # PLC200800190

Print Date
5/7/2008

CAC Memopad Information

CAMIS Case Number 27004135

Date: 5/1/2008 3 User: JLAWSON Approve

Type: Approve - Contact Name: Josh Lawson

Date: 4/24/2008 User: SKING Forward

Type: Forward - Contact Name: Samantha King

Date: 4/24/2008 User: SKING Inbound Call

Type: Inbound Call - Contact Name: Samantha KingOwner stated: `was driving the vehicle yesterday `steering wheellocked up `almost wrecked `towed to the facility `facility advised the electrical in the steering locked up and needs to be replaced `facility advised they would cover it all but $100 `dosent want to pay the $100 `vehicle is not unsafe `has a break at 9:15 11:30 and 200 `would like a call then SEEKING OUT OF VEHICLE I advised CAM CBE SR#

Date: 4/25/2008 User: AHAMMACK Inbound Callback

Type: Inbound Callback - Contact Name: Alison HammackOwner asked if some one would call her around her lunch time so she could talk this over with them

Date: 4/25/2008 User: GBAXTER Inbound Callback

Type: Inbound Callback - Contact Name: Gloria BaxterOwner called back wanting to speak to a manager or supervisor. Iadvised the owner of cbe. She said she only gets breaks at certain times. I advised the owner of the process for an CAM to give her a call back and they need time to research her concern. She said to let the CAM know she called. I advised the owner I would.

Date: 4/25/2008 User: KTUCKER Inbound Callback

Type: Inbound Callback - Contact Name: Kenneth TuckerOwner stated she needs to speak to you.

Date: 4/25/2008 User: HGOLAB Inbound Callback

Saturn CAC Information

** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Type: Inbound Callback - Contact Name: Hayley Golab

Date: 4/30/2008 User: HGOLAB Inbound Callback

Type: Inbound Callback - Contact Name: Hayley Golab

Date: 4/25/2008 User: OODEN Inbound Other

Type: Inbound Other - Contact Name: Ondrekia OdenEric Toth Dssm left a message for me to contact him.

Date: 4/25/2008 User: VBROWN Inbound Retailer Call

Type: Inbound Retailer Call - Contact Name: Valarie Brown Mel stated: You may not get to him today. He spoke with the DSSM Eric Toth. Eric instructed not to release the vehicle. DSSM will pay for the loaner until rhis resolved. DSSM wanted Dreak direct number. He wants to speak with Dreak. I provided Dreak's directnumber

Date: 4/29/2008 User: MPARKS Inbound Retailer Call

Type: Inbound Retailer Call - Contact Name: Melissa ParksMel stated: - I was advised on Friday not to release the vehicleto the owner - he needs to know where we stand - owner is in a loaner vehicle I advised Dreak was out of office on Monday, is expected to be in today. Please call Mel when you know where we aregoing to go with this.

Date: 4/30/2008 User: JBABCOCK Inbound Retailer Call

Type: Inbound Retailer Call - Contact Name: Jim BabcockService manager Mel Gochenaurr

Date: 4/25/2008 User: OODEN Information or Research

Type: Information or Research - Contact Name: Ondrekia OdenBusiness case: - ISD 11-13-2004 *expired *11/13/2007* 5 months outside warranty - ISM 44 - MTF 2 - First Owner, First saturn - NoSSP - warranty dollars $2148.60 - Incentives $2375 - No Previoussr - No Previous gw - Maintenance *poor* - No VP

Date: 4/25/2008 User: OODEN Internal Contact

Type: Internal Contact - Contact Name: Ondrekia OdenShawntese Perry RQA states this may be a 1241 to set CBE for Monday COB and check with Josh OPLA.

Saturn CAC Information
** Saturn Confidential **
Case # PLC200800190

Print Date
5/7/2008

Date: 4/30/2008 User: BBLACK Internal Contact

Type: Internal Contact - Contact Name: Beverly BlackPam advised to call the owner back and talk to them as this is apossible 1241

Date: 4/28/2008 User: SGARLA01 Outbound Call

Type: Outbound Call - Contact Name: Stephen Garland717-615-1421 I provided the owner a courtesy call.

Date: 4/25/2008 User: OODEN Outbound Call - Left Mess

Type: Outbound Call - Left Message - Contact Name: Ondrekia Oden717-615-1421

Date: 4/30/2008 User: BBLACK Outbound Call - Left Mess

Type: Outbound Call - Left Message - Contact Name: Beverly BlackI called the owner back to start 1241 case. I left a message forthe owner to call us back because this is a possible 1241

Date: 4/25/2008 User: OODEN Outbound Retailer Call

Type: Outbound Retailer Call - Contact Name: Ondrekia OdenI stated: - Concern? Mel Gochenaurr service manager states: - She needs a new power steering rack - Normally a $700 repair - We are going to do it for $100 - She called in here before she brought the vehicle in and was pretty rude to one of my consultants - Iput myself in her shoes, this is why i'm offering to cover the repair with a $100 Deductible - Once she got here she unleashed onmy consultant again i stated: - I'll let her know the repair is $100 deductible - Thank you last night she came in we had to order the part She was unleashing on my advisor again

Date: 4/25/2008 User: OODEN Outbound Retailer Call

Type: Outbound Retailer Call - Contact Name: Ondrekia OdenI stated: - Possibly Product Allegation - Owner is now claiming Injury - We need to make sure we save the parts - Owner is stating she isn't getting out of the rental until I call her Monday MelGochenaurr Service manager states: - The vehicle is ready - We will save the parts - Do I still need to do the repair for $100? Istated: - I'm unsure, If it is a product Allegation we aren't able to offer any GW, so you may want to check with you DSSM - I'm currently unsure if it is a product Allegation or not, I have to check with our OPLA on Monday - I'll give you a call Monday and let you know Mel Gochenaurr states: - I'll contact our DSSM in themean time - Thank you

Date: 4/25/2008 User: OODEN Outbound Retailer Call

Saturn CAC Information

** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Type: Outbound Retailer Call - Contact Name: Ondrekia OdenI stated: - I advised Eric Toth of the concerns and the owners complaints Eric Toth states: - Can you review it with OPLA I stated: - Monday Morning I'm going to review - I'll let you know Eric Toth states: - thanks

Date: 4/30/2008 User: BBLACK Outbound Retailer Call

Type: Outbound Retailer Call - Contact Name: Beverly BlackI called the facility & spoke to Mel and he is wanting to know if this is going to be a product support case. He said they had toleave a message but she does not call back. She was offered $100good will but that was not good enough.

Date: 4/30/2008 User: BBLACK Outbound Retailer Call

Type: Outbound Retailer Call - Contact Name: Beverly BlackI called the facility and spoke to Mel the service manager giving an FYI 1241

Date: 4/25/2008 User: OODEN Outbound Retailer Call -

Type: Outbound Retailer Call - Left - Contact Name: Ondrekia OdenI left a message with the receptionist.

Date: 4/24/2008 User: JLAWSON SR Summary

SR SummaryThe claimant alleges a possible defect with the vehicle's steering systems led to bodily injury

Date: 4/24/2008 User: JLAWSON Standard Questions

1. There were injuries as a result of the accident. 2. Injuries: Back and leg hurtin 3. There was no property damage as a result of the accident. 4. was driving at the time of the incident. 5. There were 5 occupants in the vehicle. 6. The Owner's daytime phone is The Owner's evening phone is [redacted] The Claimant's daytime phone is [redacted] The Claimant's evening phone is [redacted] 7. The events leading up to the incident are as follows:Diving going to make right turn and the steering locked up c 8. The incident occurred on 04/23/2008 at 16:35. 9. old or new Dorwart/Manor St Lancaster10. sunny/hot11. dry/pavement12. The vehicle was traveling at 15.13. There was no insurance involved.14: Vehicle Loc: Saturn of Lancaster15. Vehicle Damage: Steering shaft locking16. A police report was not filed.17. There were no other vehicles involved in the incident.18. Permission has not been granted to inspect the vehicle.

Date: 4/25/2008 User: OODEN Transfer

Saturn CAC Information

** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Type: Transfer - Contact Name: Ondrekia Oden*this activity should be before the internal contact* I stated: - Business case - Concerns Candida Ruiz owner states: - This camefrom the factory this way - Safety concern - My girls were screaming - We were scared we were going to go threw a house and causemore damage - The steering locked up - I'm so sore today, my leghurts i'm limping from this - My leg hit the dash, you know how when your legs get caught under there - I want out of the vehicle, whats going to happen next time this happens - Why would saturnwant to wait until something else happens - I could see if I didn't take care of the vehicle or it had alot of miles - The vehicle is under mileage and well taken care of - This isn't my fault it came from the factory like this - Saturn should take a look into this it could be a recall - I'll have a police report on this -I'm going to the hospital today I stated: - Since your claiming injury i need to review the case more - CBE COB Monday states: - Ok, Saturn is a great company, i'm not complaining about saturn - Its been a great car - I hope to resolve this issuewith Saturn, I don't want to have to take other steps - I get off work at 3:30, I take break at 9:15/ 11:00/ 2:00 - I'm staying in this rental until I hear from you I stated: - CBE COB Monday

Date: 4/30/2008 User: BBLACK Transfer

Type: Transfer - Contact Name: Beverly BlackThe owner states: - She was driving down a little hill went to make a right turn and when she tried to turn the steering wheel locked, it did not indicate a problem or anything and a man behind her and he got out of the car. - There was a curb and she had to stop by the curve and she had her foot on the brake and a gentleman told her that the steering wheel locked on her. -He told her to put the car in park. -She used all her force and she was cryingand she waited 15 minutes then it started up and drove fine. Theowner alleges: -when the steering locked she had to force the wheel which caused her back inury and the leg injury -There were injuries as a result of the accident; her back and leg were hurtingbadly. -She scheduled the appointment within 24 hours. -She wentto her doctor's office. -She has severe muscle pulling in the back and leg. -She is on medication. -They told her to come back intwo weeks. -3. No -4. There were 5 in the car; all were wearing seatbelts -5. [redacted] cell phone 9:15; 11; 2; after 3:30 can be gotten -6. She was driving down a little hill went to make a right turn and when she tried to turn the steering wheel locked, it did not indicate a problem or anything and a man behind her and he got out of the car. -There was a curb and she had to stop by the curve and she had her foot on the brake and a gentleman told her that the steering wheel locked on her. -He told her to putthe car in park. -She used all her force and she was crying and she waited 15 minutes then it started up and drove fine. -7. 4-23-08 around 4:35 pm -8. The happened on old or new Dorwart/Manor St Lanchester PA -9. The weather : nice sunny, hot -10. Pavement was dry -11. 15 mph -12. Insurance company-no call to them -13. The vehicle is at S/Lanchaster -14. The steering shaft locked. The cost is over $900 and she was going to pay $100 but not going to pay anything. -15. No PD report but she did speak to officer Waggoner who told her to speak to Saturn about what to do -16. No other vehicles involved -She will let this take its course but will get an attorney involved if need be **********SEEKING********** Out of the vehicle I advised a member of the product supportteam would be calling her back in 3-5 business days to speak to her about this I called the facility and gave an FYI to the service manager

Date: 4/25/2008 User: KTUCKER Transfer - No Answer

Saturn CAC Information

** Saturn Confidential **

Case # PLC200800190

Print Date
5/7/2008

Type: Transfer - No Answer - Contact Name: Kenneth Tucker

End of CAC Memopad Information

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G8AJ52FX5Z[redacted]

VEHICLE INFORMATION

Merchandising Model :	ZAJ69 -2005 ION 2 SEDAN AUTOMATIC	Warranty Start Date :	11/13/2004
BARS Order Type :	70 - RETAIL - STOCK		
Delivering Dealer :	N/A	Selling Source :	N/A
		Site Code :	N/A
		Business Associate Code :	N/A

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Open

REQUIRED FIELD ACTIONS

Vehicle Has No Current Record Of Outstanding Campaigns

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	11/13/2004	44 miles	11/13/2007	36044 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	11/13/2004	44 miles	11/13/2010	100044 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	11/13/2004	44 miles	11/13/2012	80044 miles
36/50000 CALIFORNIA EMISSIONS	11/13/2004	44 miles	11/13/2007	50044 miles
84/70000 CALIFORNIA SELECT COMPONENT	11/13/2004	44 miles	11/13/2011	70044 miles

CLAIM HISTORY

Vehicle Has No Associated Claim History

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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Saturn Product Liability
Option Report
** Saturn Confidential **

Case Nbr: PLC200800190
Vin: 1G8AJ52FX5Z[redacted]

OPTION CODE	OPTION DESCRIPTION
C60	AIR CONDITIONING
AR9	FRONT BUCKET SEATS
A31	POWER WINDOWS
6AB	STRUTS
HAA	POWER PACKAGE
J41	DISC/DRUM BRAKES
K34	CRUISE CONTROL
U1C	CD RADIO
7AB	STRUTS
8AF	RR LH STRUT
9AF	STRUTS
PG1	STEEL WHEEL
NC7	EMISSION OVERRIDE
AK5	SEAT SYS RESTRAINT
AU0	REMOTE KEYLESS ENTRY
L61	ENGINE 4 CYL
NK5	STD STEERING WHEEL
MN5	4 SPD AUTO TRANS
DG7	MIRROR O/S LH & RH
17C	GREY CLOTH
NE1	NORTHEAST EMISSION
B37	FLOOR MATS
DL5	ROADSIDE SVC DECAL
FE1	SUSPENSION SYS
IPC	TRIM INTERIOR DESIGN
K62	GENERATOR 105 AMP
MX0	AUTO TRANSMISSION
QTU	P195/60R15 TIRE
UH8	CLUSTER INST, TRIP
US6	FIXED ANTENNA
UX7	4 SPEAKER SYSTEM
V73	US/CAN VEH STATEMNT
17I	GREY INTERIOR TRIM
RF3	MERCH PKG SDN 2 AUTO
BBC	BODY COLOR ROOFRAIL
63U	BERRY RED
63L	BERRY RED
NU1	CA/N.E. EMISSIONS
FY1	TRANSAXLE RATIO 3.63

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0223367	17633	01	VW	10/25/2006	$304.61	C4208

Complaint - V29 - STAIN
Conditon - -
Cause - C29 - INOPERATIVE PART
Failed Labor -
Failed Part Nbr - 15240312 - CARPET ASM-FLR PNL
Tech Comments - CUSTOMER STATES THAT THE CARPET IS STAINED. CUSTOMER ATTEMPTED TO CLEAN AND FAILED. TECH VERIFIED. TECH TRIED TO CLEAN. UNABLE. TECH REPLACED AND RESATURNGUARDED. OK NOW.

10406	0223367	17633	02	VW	10/25/2006	$70.00	Z4632

Complaint - V29 - STAIN
Conditon - -
Cause - C29 - INOPERATIVE PART
Failed Labor -
Failed Part Nbr - -
Tech Comments - 2 DAYS OF LOANER

10406	0223367	17633	03	CP	10/25/2006	$0.00	M6015

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0223367	17633	04	VW	10/25/2006	$26.24	J3010

Complaint - V40 - LOW FLUID
Conditon - -
Cause - M05 - COULD NOT DUPLICATE
Failed Labor -
Failed Part Nbr - 21007651 - DYE-COOLANT
Tech Comments - CUSTOMER STATES THAT THE COOLANT LIGHT CAME ON. TECH CHECKED COOLANT LEVEL AND FOUND RESERVIOR TO BE LOW. TECH PERFORMED PRESSURE TEST. NO INTERNAL LEAKS AT THIS TIME. TECH REOMVED COIL & PLUGS AND CHECKED FOR INTERNAL USE OF COOLANT. NONE FOUND. TECH THEN INSTALLED COOLANT DYE INTO SYSTEM AND TOPPED OFF FLUID. CUSTOMER NEEDS TO DRIVE CAR AND MONITOR. IF LOW COOLANT LIGHT

10406	0223367	17633	05	CP	10/25/2006	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0223367	17633	06	VW	10/25/2006	$38.50	J6354

Complaint - V36 - UNUSUAL GAGE READING
Conditon - -
Cause - C02 - ALIGNMENT/ADJUSTMENT
Failed Labor -
Failed Part Nbr - -
Tech Comments - CUSTOMER STATES THAT THE GAS GAGE FLUCTUATES. FOUND BULLETIN STATING CONCERN. BULLETIN # 05-08-49-004A STATES TO UPDATE ECM. TECH UPDATED ECM, CLEARED CODES, AND RELEARNED CRANK POSITION SENSOR AND RECHECKED. OK NOW.

10406	0222458	17175	01	VW	10/3/2006	$169.08	C6870

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830779 - COVER ASM-P/SEAT CUSH
Tech Comments - TECH REPLACED RIGHT FRONT SEAT COVER BOTTOM AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	02	VW	10/3/2006	$212.14	C7050

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830785 - COVER ASM-P/SEAT BK CUSH
Tech Comments - TECH REPLACED THE RIGHT FRONT SEAT BACK COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	03	VW	10/3/2006	$152.28	C6871

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830776 - COVER ASM-D/SEAT CUSH
Tech Comments - TECH REPLACED THE LEFT FRONT SEAT BOTTOM COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	04	VW	10/3/2006	$208.43	C7051

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830770 - COVER ASM-D/SEAT BK CUSH
Tech Comments - TECH REPLACED THE LEFT FRONT SEAT BACK COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0222458	17175	05	VW	10/3/2006	$228.96	C7258

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830845 - COVER ASM-R/SEAT CUSH
Tech Comments - TECH REPLACED THE REAR SEAT BOTTOM COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	06	VW	10/3/2006	$195.97	C7280

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830820 - COVER ASM-R/SEAT BK CUSH
Tech Comments - TECH REPLACED THE RIGHT REAR SEAT BACK COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	07	VW	10/3/2006	$181.03	C7281

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - 15830817 - COVER ASM-R/SEAT BK CUSH
Tech Comments - TECH REPLACED LEFT REAR SEAT BACK COVER AS PER PREVIOUS DIAGNOSIS. APPLIED SATURN GUARD.

10406	0222458	17175	08	CP	10/3/2006	$0.00	X5050

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0222458	17175	09	CP	10/3/2006	$0.00	X5050

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0222458	17175	10	VW	10/3/2006	$37.00	Z4631

Complaint - V28 - SPOTTED/WATER MARKS
Conditon - -
Cause - C21 - CONTAMINATION/FOREIGN MAT
Failed Labor -
Failed Part Nbr - -
Tech Comments - LOANER VEHICLE FOR CUSTOMER SATISFACTION

10406	0221928	16898	01	CP	9/21/2006	$0.00	M5010

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0221928	16898	02	CP	9/21/2006	$0.00	X5050

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0213560	12158	02	CP	3/15/2006	$0.00	M5010

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0204044	7890	01	CP	8/23/2005	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0204044	7890	02	VW	8/23/2005	$51.16	E2020

Complaint - O18 - PULLS/GRABS
Conditon - -
Cause - C02 - ALIGNMENT/ADJUSTMENT
Failed Labor -
Failed Part Nbr - -
Tech Comments - CUSTOMER STATES THE CAR IS PULLING TO THE RIGHT PUT CAR ON RACK TO CHECK ALIGNMENT-ALIGNMENT OK-TEST DROVE CAR PRIOR-DID NOT PULL RIGHT-LEAD TECHNICIAN AND SERVICE MANAGER DROVE WITH CUSTOMER-VERIFIED CROWN PULL IS WHAT CUSTOMERS CONCERN WAS-ALL OK AT THIS TIME ~OK JC

10406	0204044	7890	03	CP	8/23/2005	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0198794	5239	01	VW	5/11/2005	$102.32	E2020

Complaint - O18 - PULLS/GRABS
Conditon - -
Cause - C02 - ALIGNMENT/ADJUSTMENT
Failed Labor -
Failed Part Nbr - -
Tech Comments - CUSTOMER STATES VEHICLE PULLS TO THE RIGHT-VERIFIED CONCERN ON TEST DRIVE-CROSSED FRONT TIRES-STILL PULLS TO THE RIGHT-CHECKED ALIGNMENT-IT WAS OFF PERFORMED ALIGNMENT-ADJUSTED CASTER ON BOTH SIDES AND FRONT TOE-TEST DROVE AND VERIFIED REPAIR-ALL OK

10406	0198794	5239	02	VW	5/11/2005	$68.03	E2180

Complaint - N19 - RUBBING
Conditon - -
Cause - C29 - INOPERATIVE PART
Failed Labor -
Failed Part Nbr - 10370615 - INSULATOR-FRT STAB SHF
Tech Comments - CUSTOMER STATES THERE IS A RUBBING NOISE WHEN TURNING-VERIFIED CONCERN-TEST DROVE WITH CUSTOMER-SWAY BAR BUSHINGS-ALLOWING METAL TO METAL CONTACT-REPLACED BOTH BUSHINGS AND VERIFIED-ALL OK

10406	0198794	5239	03	CP	5/11/2005	$0.00	C9995

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0198716	5239	01	VW	5/10/2005	$67.85	N2320

Complaint - L12 - SERVICE LIGHT
Conditon - -
Cause - C29 - INOPERATIVE PART
Failed Labor -
Failed Part Nbr - 10392423 - SWITCH ASM-IGN & START
Tech Comments - CS THE LOCK LIGHT IS COMING ON. TECH VERIFIED THE LIGHT IS ON. CHECKED THE COMPUTER FOR CODES--CODE B2960 IS SET IN HISTORY. THE IGNITION SWITCH IS FAULTY. TECH REPLACED THE IGNITION SWITCH, CLEARED CODES AND CHECKED OPERATION--OK.

10406	0198716	5239	02	CP	5/10/2005	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0198716	5239	03	CP	5/10/2005	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

10406	0198716	5239	04	GW	5/10/2005	$35.00	N2320

Complaint - L12 - SERVICE LIGHT
Conditon - -
Cause - C29 - INOPERATIVE PART
Failed Labor -
Failed Part Nbr - -
Tech Comments - 1 DAY RENTAL FOR CUSTOMER SATISFACTION.

10406	0196128	3325	01	CP	3/22/2005	$0.00	M5010

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0196128	3325	02	CP	3/22/2005	$0.00	M5300

Complaint - -
Conditon - -
Cause - -
Failed Labor -
Failed Part Nbr - -

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0190096	44	01	LR	11/17/2004	$1,000.00	X5117

Complaint - -
Conditon - -
Cause - M13 - RETAILER INSTALLED ACCSRY
Failed Labor -
Failed Part Nbr - -
Tech Comments - DD111304; PERSONAL 1000

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0190096	44	02	LR	11/17/2004	$1,000.00	X5120

Complaint - -
Conditon - -
Cause - M13 - RETAILER INSTALLED ACCSRY
Failed Labor -
Failed Part Nbr - -
Tech Comments - DD111304; FLEX 48604159,18588386
18824342.48228260

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
10406	0190096	44	03	LR	11/17/2004	$375.00	X5044

Complaint - -
Conditon - -
Cause - M13 - RETAILER INSTALLED ACCSRY
Failed Labor -
Failed Part Nbr - -
Tech Comments - DD111304;

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
11062	0024980	9	01	PD	10/26/2004	$93.01	Z7000

Complaint - -
Conditon - -
Cause - M10 - PDI
Failed Labor -
Failed Part Nbr - -
Tech Comments - AI49701805

CSO History Information
Case # - PLC200800190
VIN - 1G8AJ52FX5Z[redacted]

Facility	CSO Nbr	Miles	Case Nbr	Case Typ	CSO Dt	Net Paid	Labor Op
11062	0024980	9	02	CP	10/26/2004	$0.00	M6010

Complaint -
Conditon -
Cause -
Failed Labor -
Failed Part Nbr -

END OF CSO HISTORY REPORT

SATURN

SATURN OF LANCASTER
A Sutliff Company

1530 Manheim Pike
Lancaster, PA 17601
(717) 560-5777
FAX: (717) 560-5670

SERVICE INVOICE

SO# 244865 DATE/TIME IN: 4/24/2008 14:44 DATE/TIME OUT: 4/25/2008 16:41
SA: JEFFREY LASH DOC COUNT: 3 PAGE: 1

[redacted] 02 1G8AJ52FX5Z[redacted]
2005 SATURN ION 2 SDN BERRY RED
LANCASTER PA [redacted] ENGINE: L61 2.2LL4 LIC.NO:
[redacted] STK#: 1746
MILES IN/OUT 30000 / 34015
SVC DATE: 11/13/2004
SALESPERSON: MERSEREAU JR., ROBERT P

----------email: ----------

LINE 1 CUSTOMER STATES THE STEERING LOCKED UP AND THE POWER STEERING MESSAGE CAME ON. PLEASE CHECK.

AUTH: A

TECH COMM: CUSTOMER STATES THE STEERING LOCKED UP AND THE POWER STEERING MESSAGE CAME ON. TECH VERIFIED CONCERN AND FOUND C0475 SHORTED STEERING MOTOR CIRCUIT STORED IN MEMORY. TECH INSPECTED WIRING AND CONNECTORS TO THE POWER STEERING MODULE AND NO PROBLEMS FOUND. TECH FOUND THE MOTOR IS FAILING AND REPLCED STEERING COLUMN AND MOTOR.
OFFERED CUSTOMER GOOD WILL ON REPAIR WITH $100 PARTICIPATION ON 04/24/08. CUSTOMER AGREED TO $100

REPAIR 1 COLUMN ASSEMBLY, STEERING - REPLACE
OPCODE: E7680 SALE TYPE: WARRANTY PO WTY
HRS: 1.50 CASH - GM 100.00
PRIMARY TECH: JAMES ZIMMERMAN
WARR PARTS: 1

PARTS	DESC	FP	QTY	PRICE	SALE TYPE	
SN 19200757	COLUMN KI	Y	1		WARRANTY POLICY	WTY

NET ITEM: C NATIONAL RENTAL CAR SALE TYPE WARRANTY POLICY WTY
RENTAL DAYS: 1

LINE TOTAL $100.00

COMMENTS: DROP/JL

COMPLETELY SATISFIED ON OUR SURVEY IS OUR ONLY PASSING GRADE

LABOR	$100.00
TAX (Pennsylvania St)	$6.00
CUSTOMER TOTAL	$106.00
PAYMENT (AMOUNT DUE)	$106.00

CUSTOMER SIGNATURE _____

SATURN

SATURN OF LANCASTER
A Sutliff Company

1530 Manheim Pike
Lancaster, PA 17601
(717) 560-5777
FAX: (717) 560-9870

LOANER CARTER BT 1545 FOR DIAG

WORK ORDER 244885

DATE	VIN	MILEAGE	DEL. DATE	MILES	IN-SERV-DATE	LICENSE NO.	YEAR	MAKE	MODEL
04/24/08	1GBAJ52FX[redacted]	30000	11/13/04	9	11/13/04	[redacted]	05	SATURN	ION 2 SDN

Coolant Status	Engine Oil Level

10/08
34015

NAME
ADDRESS
CITY / STATE / ZIP LANCASTER PA

ENG	TRANSMISSION	COLOR	SA #	SO #
L61 2.2LL4	4 SPD AUTO	BERRY RED	99	0

HOME
BUSINESS PHONE

TAG # 881

REF SO # 02

STOCK # 1746

LABOR RATE .00

PRINTED: 10:16:54

ATTENTION:

200

PAYMENT TYPE 01

PROMISE DATE / TIME 00/00/00

COMMENTS:

DOC CNT: 1
PRK LOT:

DIAG CODES:

ST
WP ?

****** ESTIMATE ******

L #	CODES	Hrs	LABOR 4/25/08	PARTS	TOTAL
1	CUSTOMER STATES THE STEERING LOCKED UP AND THE POWER STEERING MESSAGE CAME ON. PLEASE CHECK				

WP OK NO 4/25/08
$100 CUSTOMER PARTICIPATION
GOODWILL

NO INDICATION NOW

DIAG FIRST AND SEND S/O DOWN

2) LOANER

[redacted]

[redacted]

BILLED 4/25/08 1459 $106.08

Advise SS

4/25/08 4:15 DRIVER FROM SATURN CALLED [redacted]

4/25/08 4:30 OWNER STATED WAS TOLD WAS INSTRUCTED TO NOT PURCHASE COMPLETED VEHICLE

4/25/08 4:40 LEFT MESSAGE WITH CUSTOMER NOT TO PICK UP THE CAR.

Who Authorized Repair:	
Amount of Repair: $	Date & Time:
Advisor:	
Comments:	

[redacted]

ie for loss or damage to vehicles or us or delays in parts shipments by highways or elsewhere for the of the repairs herein. The dealer

SA: JEFFREY LASH

HOURS	LABOR	PARTS	ESTIMATE TOTAL: NT ITEM	MISC
HAZDS	DISC	DEDCT	TAXES	TOTAL

TIME

PAGE 04/05

MECHANIC'S FINDINGS AND REMARKS

MECHANIC'S NAME AND NUMBER

CAUSE

CORRECTION

STICKER NO.

EXP. DATE

TIRES LF RF LR RR

BRAKES LF RF LR RR

SATURN OF LANCASTER

MECHANIC'S FINDINGS AND REMARKS

CS) Steering went out
Scanned Modules and found Code C0475 Started
Steering Motor Circuit.
Code Failure Not Present at this time - Inspected wiring
and Connectors to PS Module - No Problem found. —
Intermittent Motor Failure - Would Need to be Replaced.
Likely it would Not be done today.

MECHANIC'S NAME AND NUMBER

CAUSE

CORRECTION

7175609870

MECHANIC'S FINDINGS AND REMARKS

Replaced steering column and motor.
E7680 2.0

MECHANIC'S NAME AND NUMBER

CAUSE

CORRECTION

05/02/2008 10:34

MECHANIC'S FINDINGS AND REMARKS

'08 APR 25 PM 2:21

MECHANIC'S NAME AND NUMBER

CAUSE

CORRECTION

'08 APR 25 PM 2:48

** ACCOUNTING COPY **

SO# 244885 DATE/TIME IN: 4/24/2008 14:44 DATE/TIME OUT: 5/02/2008 9:36
SA: JEFFREY LASH DOC COUNT: 4 PAGE: 1

[redacted] 02 1G8AJ52FX5Z[redacted]
2005 SATURN ION 2 SDN BERRY RED
LANCASTER PA [redacted] ENGINE: L61 2.2LL4 LIC.NO: [redacted]
STK#: 1746
[redacted] MILES IN/OUT 30000 / 34015
SVC DATE: 11/13/2004
SALESPERSON: MERSEREAU JR., ROBERT P

----------email: ----------

LINE 1 CUSTOMER STATES THE STEERING LOCKED UP AND THE POWER STEERING MESSAGE CAME ON. PLEASE CHECK.

AUTH: A

TECH COMM: CUSTOMER STATES THE STEERING LOCKED UP AND THE POWER STEERING MESSAGE CAME ON. TECH VERIFIED CONCERN AND FOUND C0475 SHORTED STEERING MOTOR CIRCUIT STORED IN MEMORY. TECH INSPECTED WIRING AND CONNECTORS TO THE POWER STEERING MODULE AND NO PROBLEMS FOUND. TECH FOUND THE MOTOR IS FAILING AND REPLCED STEERING COLUMN AND MOTOR.
OFFERED CUSTOMER GOOD WILL ON REPAIR WITH $100 PARTICIPATION ON 04/24/08. CUSTOMER AGREED TO $100

REPAIR 1 COLUMN ASSEMBLY, STEERING - REPLACE
OPCODE: E7680 SALE RATE: A COST RATE: A COST: 40.76
HRS: 1.50 SALE TYPE: WP $23.50
PRIMARY TECH: JAMES ZIMMERMAN C 100.00
WARR PARTS: 1 AMT: 445.79

PARTS	DESC	FP	QTY	PRICE	COST	ST	
SN	19200757 COLUMN KI	Y	1	445.788	318.42	WP	$445.79

NET ITEM: C NATIONAL RENTAL CAR SALE TYPE
PO#: L#: COST: 37.00 WP $37.00
UNIT QTY: 1 UNIT AMT: 37.00 RENTAL DAYS: 1

LINE TOTAL $396.18 $606.29

COMMENTS: DROP/JL

ACCOUNT NO	SALE AMT	COST AMT	CNTL NO		
324	6.00-			LABOR	$100.00
460A	100.00-	33.01		TAX (Pennsylvania St)	$6.00
201	106.00			CUSTOMER TOTAL	$106.00
067D	37.00-	37.00	244885	PAYMENT (AMOUNT DUE)	$106.00
462	23.50-	7.74			
480	445.79-	318.42			
263	506.29				

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C20 D71
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

June 5, 2008

[redacted]
Lancaster PA [redacted]

Re: 2005 Saturn Ion
File no. 654184

Dear [redacted]

ESIS is the third party claims administrator for General Motors/Saturn handling matters that involve Product Liability.

Per our conversation on Thursday, June 5, 2008, ESIS has received information from Saturn. You indicated that the steering malfunctioned as a result of a product defect and would like reimbursement for the $100 copay and that you are making a bodily injury claim.

ESIS will review this matter further. In order to proceed with the handling of your claim we need copies of your medical records. Enclosed is a medical authorization form. Please complete and return this form to my attention. If you have questions regarding this matter please contact me at the number above.

Sincerely,

Yvette Young

AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION

I, the undersigned, hereby authorize the following Authorized Health Care Providers to make the authorized use and/or disclosure of confidential information contained in my medical records to ESIS at the address below:

Name, address, telephone number of medical provider: [redacted]
Name, address, telephone number of medical provider: # [redacted]
Name, address, telephone number of medical provider:
Name, address, telephone number of medical provider: RECEIVED
Name, address, telephone number of medical provider: JUN 18 2008
Name, address, telephone number of medical provider: ESIS-GM CLAIMS UNIT

I understand that the purpose(s) for which this information is to be used and/or disclosed is for a product liability claim against General Motors Corporation for an incident which occurred on or about 4/23/08.

The confidential information from my medical records and/or x-rays to be disclosed has no limitations as to the dates of visits or injuries to be disclosed. I understand that full disclosure is authorized. This includes interviews of doctors, EMTs, and other attendants regarding all matters relating to my examination, diagnosis, care, and treatment.

I understand that:

- I have a right to inspect or copy my confidential information that is to be used or disclosed.
- if my confidential health information is disclosed to someone who is not required to comply with the federal privacy protection regulations, then such information may be re-disclosed by the recipient and would no longer be protected.
- I may revoke this authorization at any time with respect to any Authorized Health Care Provider by notifying such Authorized Health Care Provider in writing of my revocation of this authorization and delivering to such Authorized Health Care Provider my revocation by mail or personal delivery. ESIS requests a copy of such revocation.
- the above-listed medical providers may not condition (withhold or refuse) treating me on whether I sign this Authorization.

A photocopy of this Authorization can be accepted with the same authority as the original.

Printed Name of Patient* [redacted]	Date of Birth [redacted]
Address, City, State and Zip [redacted] Lancaster PA [redacted]	Social Security Number [redacted]
Sig[redacted]	Date Signed 6-11-08
Rela[redacted]	Authority to act for individual*

*If you are a personal representative signing this Authorization, please provide a description of your relationship to the individual and a description of your authority to act for the individual below.

EXPIRATION OF AUTHORIZATION: THIS AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION WILL REMAIN IN EFFECT FOR AS LONG AS MY CLAIM AGAINST GENERAL MOTORS CORPORATION IS PENDING UNLESS IT IS EXPRESSLY REVOKED IN WRITING BY ME AS NOTED ABOVE.

ESIS – General Motors Claims
PO Box 300
M/C 482-C20-D71
Detroit, MI 48265-3000

Claim Number: 654184
Claims Administrator: Yvette Young

ESIS is the third-party administrator for General Motors Corporation.

AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION

I, the undersigned, hereby authorize the following Authorized Health Care Providers to make the authorized use and/or disclosure of confidential information contained in my medical records to ESIS at the address below:

[redacted] Howard Stephen Diamanto Name, address, telephone number of medical provider: [redacted] Lancaster # [redacted]
Name, address, telephone number of medical provider: [redacted]
Name, address, telephone number of medical provider:
Name, address, telephone number of medical provider:
Name, address, telephone number of medical provider:

RECEIVED
JUN 18 2008
ESIS-GM CLAIMS UNIT

I understand that the purpose(s) for which this information is to be used and/or disclosed is for a product liability claim against General Motors Corporation for an incident which occurred on or about 4/23/08.

The confidential information from my medical records and/or x-rays to be disclosed has no limitations as to the dates of visits or injuries to be disclosed. I understand that full disclosure is authorized. This includes interviews of doctors, EMTs, and other attendants regarding all matters relating to my examination, diagnosis, care, and treatment.

I understand that:

- I have a right to inspect or copy my confidential information that is to be used or disclosed.
- if my confidential health information is disclosed to someone who is not required to comply with the federal privacy protection regulations, then such information may be re-disclosed by the recipient and would no longer be protected.
- I may revoke this authorization at any time with respect to any Authorized Health Care Provider by notifying such Authorized Health Care Provider in writing of my revocation of this authorization and delivering to such Authorized Health Care Provider my revocation by mail or personal delivery. ESIS requests a copy of such revocation.
- the above-listed medical providers may not condition (withhold or refuse) treating me on whether I sign this Authorization.

A photocopy of this Authorization can be accepted with the same authority as the original.

Printed Name of Patient* [redacted]	Date [redacted]
Address, City, State and Zip [redacted] Lancaster PA [redacted]	[redacted]
Signature [redacted]	Date Signed 6-11-08
Relationship to Insured [redacted]	Authority to act for Individual*

*If you are a personal representative signing this Authorization, please provide a description of your relationship to the individual and a description of your authority to act for the individual below.

EXPIRATION OF AUTHORIZATION: THIS AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION WILL REMAIN IN EFFECT FOR AS LONG AS MY CLAIM AGAINST GENERAL MOTORS CORPORATION IS PENDING UNLESS IT IS EXPRESSLY REVOKED IN WRITING BY ME AS NOTED ABOVE.

ESIS – General Motors Claims
PO Box 300
M/C 482-C20-D71
Detroit, MI 48265-3000

Claim Number: 654184
Claims Administrator: Yvette Young

ESIS is the third-party administrator for General Motors Corporation.

Stephen G Diamantoni & Assoc. Family Practice

Patient Name: [redacted]
Patient Number: 50726.0
Chart Number:

Procedure

Service Date: 06/20/08
Procedure: 99213 OFFICE/OUTPATIENT VISIT, EST
Modifiers:
Units: 1

Diagnosis: 840.9 SPRAIN SHOULDER/ARM NOS
847.1 SPRAIN THORACIC REGION
847.0 SPRAIN OF NECK
E813.0 MV-OTH VEH COLL-DRIVER

Service Ctr: Stephen G Diamantoni & Assoc. Franklin Street
POS Code: 11 - Office
Referral:
Authorization:

Provider: Riley, M.D., Timothy Daniel
Supervisor: Gerstein MD, Howard J
Referring: Riley, M.D., Timothy Daniel

Financial Details

Encounter:	284360	Charge:	$80.00
Voucher:		Adjustments:	$0.00
Finance Ctr:		Payments:	$0.00
Department:		Balance:	$80.00

Insurance Billing

Unbilled

Notes

Charge General Note

Created by Dani Ankrim on 06/23/2008
Last updated by Dani Ankrim on 06/23/2008

no mva info 6/23/08

---------- END General NOTE ----------

Patient: 50726.0 [redacted]
DOB: [redacted]
SSN: [redacted]

Date: 06/20/2008 16:15
Provider: Riley, M.D., Timothy Daniel
Encounter: acute office visit

HISTORY OF PRESENT ILLNESS
4/25 MVA. Steering wheel locked when she was going down a hill. Strained shoulder and back. Came to a sharp stop on a curb. Has pain from her neck down her back. Dr. Diamantoni saw. Had headache and pain down R leg. Saw CAB, sent to PT/OT. Has a lot pain the day after. Currently taking Tramadol and Flexeril. Previously taking ibuprofen 800mg OTC twice daily. Flexeril helps some, lasts for 5-6 hours. Notes headache, posterior, both sides. No XR. Has pain in R arm, "burning" on outside of arm. R shoulder pain. Pain has not improved at all despite conservative

Axial loading produces pain. Spurling's positive for pain in R arm. Neck FROM with pain in R shoulder and R arm, worst on R lateral rotation.

Shoulders FROM despite discomfort with all motions. No gross deformities. Tender to palpation of R trapezius throughout, R glenohumeral joint. Decreased strength on forced adduction. Grip strength 5/5 bilat. Subscapularis, supraspinatus, and infraspinatus strength testing all normal.

Low back diffuse tenderness, mild paraspinous muscle spasm.

Sensation altered to light touch on R lateral arm. Reflexes 2+ bilat biceps.

IMP
MVA
Cervicalgia
Working diagnosis of cervical radiculopathy

PLAN
XR and MRI of C-spine to rule out foraminal impingement and herniated disc. Add ibuprofen. She has severe claustrophobia and outright refuses anything but an open MRI. I offered Vicodin, which she refused due to addictive potential.

PHYSICAL FINDINGS
- Vitals taken 06/20/2008 04:15 PM

Systolic BP-Sitting	140 mmHg	100 - 120
Diastolic BP-Sitting	78 mmHg	60 - 80
Pulse Rate-Sitting	72 bpm	60 - 100
Respiration Rate	16 per min	18 - 26
Temp-Oral	99.3 F	97.6 - 99.6
Weight	162 lbs	98 - 183

Patient: 50726-0[redacted]
DOB: [redacted]
SSN: [redacted]

Date: 06/20/2008 16:15
Provider: Riley, M.D., Timothy Daniel
Encounter: acute office visit

Timothy Daniel Riley, M.D.
Entered data sealed by: Tim Riley Date: 06/23/2008 09:43

Stephen G Diamantoni & Assoc. Family Practice

Patient Name: [redacted]
Patient Number: 50726.0
Chart Number: [redacted]

Procedure

Service Date: 06/10/08
Procedure: 99213 OFFICE/OUTPATIENT VISIT, EST
Modifiers:
Units: 1

Diagnosis: 840.9 SPRAIN SHOULDER/ARM NOS
847.1 SPRAIN THORACIC REGION
847.0 SPRAIN OF NECK

Service Ctr: Stephen G Diamantoni & Assoc. Franklin Street
POS Code: 11 - Office
Referral:
Authorization:

Provider: Brubaker, PA-C, Cindy
Supervisor: Gerstein MD, Howard J
Referring: Brubaker, PA-C, Cindy

Financial Details

Encounter:	280678	Charge:	$80.00
Voucher:		Adjustments:	$0.00
Finance Ctr:		Payments:	$0.00
Department:		Balance:	$80.00

Insurance Billing

06/11/2008 Mercy Health Plan Ailment: ov lanc

Notes

None

Patient: 50726.0 - [redacted]
DOB: [redacted]
SSN: [redacted]

Date: 06/10/2008 16:15
Provider: Brubaker, PA-C, Cindy
Encounter: acute office visit

CHIEF COMPLAINT
The Chief Complaint is: Neck and shoulder pain w/ headache.

HISTORY OF PRESENT ILLNESS
[redacted] is a 39 year old female.

- Headache.
- Musculoskeletal symptoms incident with her car on 4/25/08

she was driving along when the steering went out - she had to try and steer the car off the road-she has been having alot of right shoulder/arm/neck and upper back pain
also having more and more headaches as the time goes on
can't sleep due to the pain.

- No eye symptoms.

CURRENT MEDICATION
- Flonase 50 MCG/ACT SUSP, 1 bid 30 days, 5 refills

PAST MEDICAL/SURGICAL HISTORY
Reported History:
No recent change in medical history no hx of neck or shoulder injury in the past
seen 4/25 here and given naprosyn which did not help.

ALLERGIES
- Sulfa Drugs Reaction: Asthma/Shortness of Breath, Skin Rashes/Hives Confirmed: 09/25/2006

REVIEW OF SYSTEMS
Systemic symptoms: Feeling poorly (malaise). No fever and no recent weight change.
Head symptoms: Headache. No facial pain and no sinus pain.
Neck symptoms: Neck pain, neck stiffness, and muscle spasms in the neck. No lump or swelling in the neck.
Eye symptoms: No vision problems.
Otolaryngeal symptoms: No earache, no nasal discharge, no hoarseness, and no sore throat.
Neurological symptoms: Dizziness.

PHYSICAL FINDINGS
- Vitals taken 06/10/2008 04:15

Systolic BP-Sitting	120 mmHg	100 - 120
Diastolic BP-Sitting	90 mmHg	60 - 80
Pulse Rate-Sitting	84 bpm	60 - 100
Respiration Rate	20 per min	18 - 26
Weight	162 lbs	98 - 183

Patient: 50726.0 [redacted]
DOB: [redacted]
SSN: [redacted]

Date: 06/10/2008 16:15
Provider: Brubaker, PA-C, Cindy
Encounter: acute office visit

General appearance:
° Well developed. ° Well nourished. ° In no acute distress.
Neck:
• Demonstrated a decrease in suppleness. • Stiff with dorsiflexion. ° Thyroid showed no abnormalities.
Eyes:
General/bilateral:
Extraocular Movements: ° Normal.
Pupils: ° PERRLA.
Nose:
° No nasal discharge seen.
Pharynx:
Oropharynx: ° Normal.
Lungs:
° Normal breath sounds/voice sounds.
Cardiovascular system:
Heart Rate And Rhythm: ° Normal.
Musculoskeletal system:
Cervical Spine:
General/bilateral: • Cervical spine showed abnormalities tenderness and spasm over trapezious bilaterally
full ROM shoulders with pain when moving right shoulder
tenderness along the paraspinal muscles upper back with spasm. • Cervical spine showed tenderness on palpation. • Cervical spine pain was elicited by motion. ° Cervical spine had a normal appearance. ° Cervical spine showed full range of motion. ° Cervical spine showed no instability.

ASSESSMENT

- Thoracic sprain
- Neck strain
- Shoulder strain

PLAN

- Return to the clinic if condition worsens or new symptoms arise
- Analgesics (non-steroidal anti-inflammatory agents)
- Moist heat
- Consultation with a physical therapist 8 visits

RX ORDER

- Flexeril 10 MG TABS, 1hs 30 days, 1 refills
- Tramadol HCl 50 MG TABS, 1q4h 30 days, 1 refills, prn for pain

Cindy Brubaker, PA-C

Patient: 50726.0 - [redacted]
DOB: [redacted]
SSN: [redacted]

Date: 06/10/2008 16:15
Provider: Brubaker, PA-C, Cindy
Encounter: acute office visit

Entered data sealed by: Cindy Brubaker Date: 06/10/2008 16:26

Stephen G Diamantoni & Assoc. Family Practice

Patient Name: [redacted]
Patient Number: 50726.0
Chart Number: [redacted]

Procedure

Service Date: 04/21/06
Procedure: 99213 OFFICE/OUTPATIENT VISIT, EST
Modifiers:
Units: 1

Diagnosis: E958.5 INJURY-MVA Suicide

Service Ctr: Stephen G Diamantoni & Assoc. Franklin Street
POS Code: 11 - Office
Referral:
Authorization:

Provider: Martin PA-C, Brian A
Supervisor: Gerstein MD, Howard J
Referring: Martin PA-C, Brian A

Financial Details

Encounter: 5955		Charge:	$60.00
Voucher:		Adjustments:	$0.00
Finance Ctr:		Payments:	$0.00
Department:		Balance:	$60.00

Insurance Billing

04/27/2006 Ross Insurance Agency Ailment: ov lanc

Notes

Charge General Note

Created by Marta Rodriguez on 11/14/2006
Last updated by Marta Rodriguez on 11/14/2006

Ross Ins can not id pt

---------- END General NOTE ----------

04-21-06. back pain s/p MVA. _____ MSC/BAM

4-21-06 Pt Dx BAM of back pain s/p MVA. I sch appt for PT on Aquatic Therapy on 5/4/06 @ 11:45 am. Pt does not need pre-authorization for the first 12 visit (Pt stated H.P insurance said about it) _____ MSC.

[redacted]

dob: [redacted] dos: 04/21/06

S: Pt. was involved in MVA on the 19th. Vehicle was hit from behind. Their vehicle was stationery. Air bags did not deploy. All occupants were restrained. X-rays in the ER were neg. Pt. discharged on Ibuprofen. Chief complaint continues to be some periodic headaches, low back pain and stiffness.

O: No pertinent pos. noted with HEENT, pulmonary, cardiac, GI or neuro. Vital signs stable. Appears to be in some mild discomfort. HEENT clear. Neck full range of motion noted without limitation. Lungs ct bil. Heart RRR. Chest wall nontender. Abd. unremark. Musculoskeletal, muscle strength symmetric bil. Range of motion of low back is slightly limited to flexion and rotation. Straight leg raises are neg. Reflexes 2+. Neuro, no focal deficits noted.

A: Headaches/back pain, status post MVA.

P: Continue with Ibuprofen. Schedule pt. for PT. F/u after completion of PT-sooner if any acute issues develop. BAM/dlf D: 04/21/06 T: 05/01/06

G

JOSEPH F. VOYSTOCK, M.D., FACS
STEVEN P. WORATYLA, M.D., FACS

"Where Patients Always Come First"
Board Certified Surgical Specialists

July 30, 2008

Steven N. Dorf, D.O.
Otolaryngology Physicians of Lancaster
810 Plaza Blvd, Suite 101
Lancaster, PA 17601

RE:
DOB:

Dear Dr. Dorf:

is a 39 year old female who was seen in the office today with a 3 cm right carotid body tumor. This was found serendipitously after a car accident. She had imaging studies of her neck including a CT Scan and ultrasound confirming a 3 cm right carotid body tumor. There is no significant carotid stenosis on ultrasound. I did review her CT Scan.

On examination, there is only a vague palpable mass in the right knee. She is asymptomatic in regards to her carotid body tumor.

I do feel that this carotid body tumor should be removed. I have discussed the procedure with her including the risks of bleeding, infection and stroke. She understands and agrees to proceed. We will make arrangements for her to have this done in the near future.

Thank you for allowing myself and Surgical Specialists of Lancaster the opportunity to care for this patient.

Sincerely,

Steven P. Woratyla, M.D., FACS
Dictated but not read
SPW/mry

Cc: Timothy D. Riley, M.D./Stephen G. Diamantoni, M.D. and Asso.

2110 Harrisburg Pike, Suite 308 – Lancaster, PA 17604-3200 – Telephone (717)544-3073 – Fax (717)544-3074
306 North Seventh Street – Columbia, PA 17512 – Telephone (717) 684-1500

[redacted] Sex:F [redacted]

Print this Page
MR#:0623257

MR CervicalSpine **Jun 28, 2008 10:11**

Rad Image VIEW

SIGNED
Patient: [redacted] DOB: [redacted]
[redacted]
LANCASTER, PA [redacted]
MRN: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No:
Account No: [redacted] Pt Loc: O
Acct: [redacted] LGH: MRC
Final Report MRI GROUP - CROOKED OAK
1671 Crooked Oak Drive
Lancaster, PA 17601
(717) 291-1016
Patient: [redacted] Date of Birth: [redacted]
[redacted]
LANCASTER, PA [redacted]
[redacted] MR Number: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No: 90002
Account No: [redacted] Patient Loc: O -
Page 6
NAME: [redacted] ACCT: ([redacted] MRN: 0623257
Accession: 5724764
MRC MRC-MRI CERVICAL SPINE Jun 28 2008 10:11AM
RESULT:
MRI of the cervical spine.
Clinical History: 39-year-old female with neck pain and right arm pain.
Technique: T1-weighted, T2-weighted, and gradient-echo sagittal images, as well as T2-weighted coronal images, and gradient-echo T2-weighted axial images of the cervical spine were obtained.
Findings: There is a mass present in the soft tissues of the neck on the right side posterior to the submandibular gland. This measures approximately 3.2 x 2.5 x 3.2 cm in diameter. The mass was not entirely evaluated since this was an MRI for the cervical spine. Further evaluation of the neck with CT scan with and without contrast is suggested for further evaluation.
The cervicovertebral bodies are normal in height and signal intensity. There is mild disk space narrowing and spurring at C5-C6. The cervical cord is normal in size and signal intensity. There is no evidence of cervical disk herniation, encroachment on the cervical cord or neural foramen.
IMPRESSION:
No significant bony abnormality in the cervical spine.
Prominent mass in the soft tissues of the neck on the right side. CT scan with and without contrast material is suggested for further evaluation.
Read by: JANESKY MD, CINDY M.
Signed by: JANESKY MD, CINDY M.
Signed Date: Jun 29 2008 5:14PM

[redacted] Sex:F [redacted]

Print this Page
MR#:0623257

Neck CT

Jul 07, 2008 21:12

Rad Image VIEW

SIGNED
Patient: [redacted] DOB: [redacted]
[redacted]
LANCASTER, PA [redacted]
MRN: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No:
Account No: [redacted] Pt Loc: O
Acct: [redacted] LGH: CCT
Final Report MRI GROUP
Lancaster General Hospital
Department of Radiology and Diagnostic Imaging
Lancaster, PA 17604
(717) 544-4900
64 Slice CT
Patient: [redacted] Date of Birth: [redacted]
[redacted]
LANCASTER, PA [redacted]
[redacted] MR Number: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No: 90003
Account No: [redacted] Patient Loc: O -
Page 5
NAME: [redacted] ACCT: 000114991696 MRN: 0623257
Accession: 5736936
CCT CCT-CT SOFT TISS NECK W/CON Jul 7 2008 9:12PM
RESULT:
CT scan of the neck with intravenous contrast on 07/07/2008.
Clinical Indication: Right neck mass seen on MRI. Assess.
Intravenous contrast-enhanced axial CT scans of the neck were obtained. In the right neck there is a densely enhancing carotid space mass. It is located at the carotid bifurcation and splays the internal and external carotid arteries. The mass measures 2.1 cm AP x 2.9 cm transverse x 3.5 cm craniocaudal. It is most consistent with a carotid body/glomus tumor. There are a few subcentimeter lymph nodes in the neck in the deep cervical lymph node chain bilaterally. These are not hyperenhancing and do not meet adenopathy by CT criteria.
IMPRESSION:
Well-defined hyperenhancing carotid space mass splaying the proximal internal and external carotid arteries, most compatible with a carotid body/glomus tumor.
Read by: FEARNOW III MD, EDGAR C
Signed by: FEARNOW III MD, EDGAR C
Signed Date: Jul 8 2008 9:34AM

– Carotid US in SSL office

Page created: Thursday, July 10, 2008 12:00 PM For: CTSTEVEN

Top of Page

[redacted]

[redacted] Sex:F [redacted]

Print this Page

MR#:0623257

Spine Cervical

Jun 27, 2008 18:04

Rad Image VIEW

SIGNED
Patient: [redacted] DOB: [redacted]
[redacted]
LANCASTER, P[redacted]
MRN: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No:
Account No: [redacted] Pt Loc: O
Acct: [redacted] LGH: XRP
Final Report Lancaster General Health Pavilion
Diagnostic Imaging and Women's Center
Lancaster, PA 17604-3200
(717) 544-3104
Patient: [redacted] DOB: [redacted]
[redacted]
LANCASTER, PA [redacted]
[redacted] MRN: 0623257
Ordering Dr: TIMOTHY D. RILEY MD Order No: 90001
Account No: [redacted] Pt Loc: O -
Page 5
NAME: [redacted] ACCT: [redacted] MRN: 0623257
Accession: 5724343
XRP PAV-SPINE, CERVICAL ROUTINE 4VW Jun 27 2008 6:04PM
RESULT:
Cervical spine, 4 views.
History: Neck and bilateral shoulder pain after injury April 25, 2008. Tingling down both arms.
AP, oblique, and lateral images of the cervical spine demonstrate slight disk space narrowing at C5-C6 consistent with mild degenerative disk disease. The bones are otherwise normal in appearance. Alignment is normal. The bony neural foramen are normal. There are no cervical ribs.
IMPRESSION:
Minimal degenerative disk disease at C5-C6.
Read by: BROOKS DO, THOMAS
Signed by: BROOKS DO, THOMAS
Signed Date: Jun 27 2008 7:04PM

[redacted]. 7/10/2008
TOTAL P.07

Med. Record No.: 22098
Date of Exam: 07/30/2008
Date of Print: 07/31/2008

Extracranial Examination

Patient name:
Patient DOB:

Referring physician: Dr. Steven Woratyla, Surgical Specialists of Lancaster, P.C. 2110 Harrisburg Pike Suite 308, Lancaster, PA 17604

Indication:

Master ListNeoplasm of unspecified site.
F/u to carotid body tumor observed on Neck CT done 7/7/08.

Results:

	Right Side		Left Side	
	PSV [cm/s]	EDV [cm/s]	PSV [cm/s]	EDV [cm/s]
CCA prox.	108	35	92	33
CCA mid.	92	35	85	35
CCA dist.	88	33	79	31
Bulb prox.	59	26	39	14
ICA prox.	75	36	69	25
ICA mid.	82	40	79	36
ICA dist.	86	47	87	44
ECA prox.	100	29	93	25
Vertebral prox.	41	21	39	16
Ratio ICA / CCA	1.0	1.4	1.1	1.4
Vertebral Artery	Antegrade flow		Antegrade flow	

Report Summary:

Impression:

Duplex exam of the bilateral carotid arteries reveals:

RIGHT SIDE:

1. No significant stenosis of the right internal carotid artery.
2. Antegrade flow in the right vertebral artery.
3. Carotid body tumor observed measuring = 2.9 cm L x 2.6 cm W x 2.3 cm AP. This tumor splays the ECA and ICA. The tumor does not appear to involve the vessels.

LEFT SIDE:

1. No significant stenosis of the left internal carotid artery.

2. Antegrade flow in the left vertebral artery.

Sonographer: Lee Hoffer RDMS

Physician: Steven P. Woratyla M.D.

CPT: 93880 - Carotid Duplex Ultrasound; complete.

Electronically signed by: Steven P. Woratyla, M.D., FACS, at: Jul 30 2008 05:21PM

Patient: [redacted]
DOB:
SSN:

Date: 08/08/2008 16:00
Provider: Gerstein MD, Howard J.
Encounter: Pre-Op PE

PHYSICAL FINDINGS

- Vitals taken 08/08/2008 04:00 PM

Systolic BP-Sitting	130 mmHg	100 - 120
Diastolic BP-Sitting	80 mmHg	60 - 80
Pulse Rate-Sitting	84 bpm	60 - 100
Respiration Rate	18 per min	18 - 26
Weight	161 lbs	98 - 183
Peak Flow	420	

S: A 39 year old who presents for pre-op. She will be getting a globus tumor removed right side of her neck. Medical problems include smoking addiction and pain, s/p MVA in April.

Past medical history includes she is a G8, P5, AB3, s/p 5 C-sections. She had her gall bladder out. No meds. Social history, smoker as above.

O: On exam, blood pressure is 130/80. In general she is in no distress. Head, eyes, ears, nose and throat are clear. Lungs are clear. CV is regular. Abdomen is soft, nontender with good bowel sounds. No masses. Extremities are normal. Her CBC is normal. Her nonfasting BMP shows sugar of 148. Chest x-ray and EKG are pending.

Plan: She is cleared for surgery pending review of her chest x-ray and EKG.
HJG/ty 08/08/08

VACCINATIONS

- Td Dose #1 Status: Reported Date: 01/01/2007

Howard J. Gerstein MD
Entered data sealed by: Howard Gerstein Date: 08/10/2008 16:12

ESIS 800-888-0164 tel
300 Renaissance Center 313-665-0911 fax
Mail Code 482 C19 B61
Detroit, MI 48265 www.esis.com

Yvette Young
Claims Administrator

5

September 23, 2008

[redacted]

LANCASTER PA[redacted]

Re:	Claimant:	[redacted]
	Date of Event:	04/23/08
	Our File:	654184
	Our Client:	General Motors Corporation

Dear [redacted]

This will acknowledge my conversation with you on September 22, 2008, during which we agreed to settle the above matter for $1,000.00.

Prior to issuing the check, the enclosed Release needs to be signed by you in the presence of a Notary Public. Please read the Release carefully, as this will be considered the full and final settlement of any and all claims with regard to this matter.

Once I have the completed Release, a settlement check will be issued in the agreed amount of $1,000.00.

Should you have any questions, please do not hesitate to contact me at 800.888.0164.

Thank you for your cooperation in this matter.

Sincerely,

Yvette Young

Enclosure:
Release

RELEASE AND INDEMNIFICATION OF ALL CLAIMS

FILE NUMBER: 8213-259-654184 Claims Administrator: Yvette Young

KNOW ALL MEN BY THESE PRESENTS:

The undersigned, [redacted] being of lawful age, for the sole consideration of One Thousand dollars, ($1000.00) to the undersigned in hand paid, receipt whereof is hereby acknowledged, does hereby and for my heirs, executors, administrators, successors and assigns, release, acquit, and forever discharge **General Motors Corporation, ESIS Inc.**, and , and his, her, their, or its agents, servants, successors, heirs, executors, administrators and all other persons, firms, suppliers, corporations, associations or partnerships, the "Releasees", of and from any and all claims, causes of action, demands, rights, damages, costs, loss of service, expenses and compensation whatsoever, which the undersigned now has/have, or which may hereafter accrue on account of, or in any way growing out of, any and all known and unknown, foreseen and unforeseen bodily, personal injury and property damage, and the consequences thereof resulting to or resulting from the accident, casualty or event which occurred on or about the 23rd day of April, 2008, at or near Lancaster PA.

It is understood and agreed that this settlement is the compromise of a doubtful and disputed claim, and that the payment made is not to be construed as an admission of liability on the part of the party or parties hereby released, and that said Releasees deny liability therefore and intend merely to avoid litigation and buy their peace.

The undersigned hereby declare(s) and represent(s) that the injuries sustained are, or may be, permanent and progressive and that recovery therefrom is uncertain and indefinite, and in making this Release, it is understood and agreed, that the undersigned relies wholly upon the undersigned's own judgment, belief and knowledge of the nature, extent, affect and duration of said injuries and liability therefore, and it is made without reliance upon any statement or representation of the party or parties hereby released, or their representatives, or by any physician or surgeon by them employed.

It is understood and agreed that this Release is intended to cover, and does cover, without limitation, claims which are known and unknown, claims for known and unknown injuries, and/or damage claims for anticipated or unanticipated injuries and/or damage; and claims for expected or unexpected consequences of injuries and/or damages, which have resulted or may result from any alleged conduct, acts, or omissions of any of the Releasees.

It is understood and agreed that the undersigned, his/her heirs, executors, administrators, and assigns does agree to indemnify, save harmless and defend the Releasees from all claims and demands for damages, costs, expense or compensation on account of, or in any way arising out of the accident, casualty or event which occurred on or about 4/23/08, including actual damages, actual attorneys fees and all other costs arising out of claims for contribution and/or common law indemnification, and/or contractual indemnification brought against the Releasees by any person whatsoever.

It is further understood that this settlement is a confidential settlement, the terms of which will not be disclosed to any third person except as required by law.

The undersigned further declare(s) and represent(s) that no promise, inducement or agreement not herein expressed has been made to the undersigned, and that this Release contains the entire agreement between the parties hereto, and that the terms of this Release are contractual and not mere recital.

RECEIVED

OCT 02 2008

ESIS-GM CLAIMS UNIT

Initials [redacted]

FILE NUMBER: 8213-259-654184

ANY PERSON WHO, WITH INTENT TO DEFRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT, IS GUILTY OF INSURANCE FRAUD.

THE UNDERSIGNED HAS READ THE FOREGOING RELEASE AND FULLY UNDERSTANDS IT.

Signed, sealed and delivered this 29th day of September, 2008

[redacted]ON: READ BEFORE SIGNING

[redacted] LS

WITNESS _____ _____ LS

State of Pennsylvania }
County of Lancaster }

On the 29th day of September, 2008, before me personally appeared Candida Ruiz to me known to be the person(s) named herein and who executed the foregoing Release and she acknowledged to me that she voluntarily executed the same.

My term expires January 15, 2012

Arling Rodriguez
Notary Public

NOTARIAL SEAL
ARLING RODRIGUEZ
Notary Public
LANCASTER CITY, LANCASTER COUNTY
My Commission Expires Jan 15, 2012

Service Request Detail

SR No.	71-625686343	Ref No.		Goodwill	No Goodwill Offered	BRC Type	PAR
Account		Site		GW SubType		Bus. Unit	BRC
Last Name	[redacted]	First Name	[redacted]	Approval	Not Initiated	Area	PAR
Daytime #		Evening #		UCC	Steering - General	Sub-Area	Initiate PAR- Injury
Address		City	Pittsburgh	Involved Dir		Safety	Yes
State	PA ZipCd [redacted]	Con Acct		Source	Phone	Updated	5/21/2008 01:03:43 PM
Serial #/VIN	1G1ZS52F25F [redacted]	Model Year	2005	Priority	Medium License # CHEVROL	Owner	VEULEMBR
Make	Chevrolet	Warr. Start	02/21/2005	Status	Open	Opened	5/6/2008 10:32:24 PM
Model	Malibu	Mileage	38000	Sub-Status	Dissatisfied	Closed	
Abstract	2005 Chevrolet Malibu - Steering Wheel - Locked Up						
Customer Description	This is a BRC-PAR case / do not assume / forward all						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Driver	1/21/2008 07:30:00 AM	Y	0	1	Asphalt	Dry	n/a	unknown

Driver Last Name	Driver First Name	Height	DOB	Disabilities
[redacted]		5'11 1/2	[redacted]	none

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Hagergy	Gail	[redacted]	Progressive Insurance

Incident Loc	Baum Boulevard, Pittsburg, PA	Incident Desc	I was driving along the road @ 43 to 45mph & then a light just came on and after a few minutes the wheel just get tight & when I tried to turn my steering wheel has locked up & I hit a pole, then my air bag deployed & the next thing I know I was at the hospital already
Component	Steering wheel locked up	Damage Desc	Vehicle is total wrecked
Vehicle Loc	Salvar Auto Wrecking Company - Chedwick, PA	Add'l Info	Just want someone to help me on this case, ive been hospitalized & I just want help
Emgcy Svc Names	Pittsburg Police Department	Maint Loc	DON ALLEN CHEVROLET/OLDSMOBILE, 5315 BAUM BLVD

PAR Detail

Collision	Y	Non Collision	Property Damage	Y	Thermal Evt	N	Spec Equip	NONE	
Vehicle Speed	40		Weather Condition	Nice			Prop Owner	Pole	Property Type: Pole
Last Service Date			Loc Last Service				Property Location	On the Corner of street	Prop Est Repair Cost: $190.00
Veh Est Repair Cost			Spec Equip Installer	NONE			Prop Damage Description	Damage to a pole, they are sending him an invoice for the pole	
Primary Veh Use	Personal		Inspection Type				Inspected By	Inspection Not Performed	Inspection Date/Time
Veh Damage Description	The vehicle is totaled, front of vehicle is smashed						Explain Other	Inspection Not Performed	

Service Request Detail

PAR Injuries

Last Name	First Name	DOB	Location	Phone #	Seating Pos	Restraint Type
[redacted]			Occupant of Owner's Vehicle	[redacted]	Driver	

Injury Description	Medical Rpt#	Treatment Location	Treated By
Neck,Shoulder, and Back Injuries, Chipped Ribs		Presbytarian University Hospital, Pittburg, PA	

Street Address	City	State	Zip Code
[redacted]	Pittsburgh	PA	[redacted]

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/21/2008 01:04:33 PM	MARQUEMO	MARQUEMO	BRC PAR	ESIS- Thermal Event	Done	5/21/2008 01:05:25 PM	ESIS- Thermal Event - Third Party Property Damages

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

File fowarded to ESIS due to thermal event and third party property damages.

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/21/2008 01:03:49 PM	MARQUEMO	ESISBIQU	Escalation	ESIS- Thermal Event	In Progress		Assign to ESIS

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Thermal Event - Third Party Property Damages

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/20/2008 10:36:09 AM	VEULEMBR	VEULEMBR	Scheduled Follow-up		Scheduled Alarm		f/u to see if ESIS has picked up file

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

f/u to see if ESIS has picked up file

BrandonVeuleman/par/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/15/2008 09:55:35 AM	DRAHEICM	MARQUEMO	Notify CRM		Done	5/21/2008 01:00:37 PM	ESIS-Thermal event

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 04:27:35 PM	VEULEMBR	VEULEMBR	Scheduled Follow-up		Done	5/20/2008 10:36:01 AM	Follow up on escalation

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

CRS to follow up w/ case to see if ESIS has recieved this case.

CRS to follow up on case 05-20-08 between 11am-2pm EST

BrandonVeuleman/abx/par

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 04:26:42 PM	VEULEMBR	DRAHEICM	BRC PAR	ESIS- Thermal Event	Done	5/15/2008 09:55:34 AM	ESIS- Thermal Event

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

2005 Chevrolet Malibu

Brandon Veuleman / PAR/ATX

Received and assigned for ESIS escalation.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 04:25:57 PM	VEULEMBR	VEULEMBR	BRC PAR	ESIS- Thermal Event	Done	5/14/2008 04:26:40 PM	ESIS- Thermal Event

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

2005 Chevrolet Malibu

Brandon Veuleman /PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 04:04:23 PM	VEULEMBR	VEULEMBR	Ownership Changed	Ownership Escalated to BRC	Done	5/14/2008 04:04:24 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:10:24 PM	DRAHEICM	VEULEMBR	Ownership Changed		Done	5/14/2008 01:10:24 PM	Service Request Ownership has changed FROM: RIVARA TO: VEULEMBR

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:10:05 PM	DRAHEICM	VEULEMBR	BRC PAR	Initial Contact- Phone	Done	5/14/2008 04:13:47 PM	Initial Contact made

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

CRS spoke w/ cust [redacted]

Cust sts: A light came on - DIC, while driving to make it through a stoplight, all of the sudden the steering wheel locked. Hard to turn, ran into a pole – The vehicle is totaled, front of vehicle is smashed. Attorney and Insurance is involved. Intensive care for 3 days, hospital for 7 days. Neck, Head, Back all injured. Bone chipped in his rib. He is also having Head-aches.

Cust sks: he wants a car, he had a 2005 car, and now he has nothing. Spent a week in the hospital. Has nothing to drive.

CRS adv: someone from the Claims Department will be contacting him within 7-10 business days.

BrandonVeuleman/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:59 PM	DRAHEICM	VEULEMBR	BRC PAR	Initial Contact- Dealer	Done	5/14/2008 03:46:35 PM	No Dealer Contact Needed

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

No dealer contact needed. Cust's vehicle is out of warranty and has not been to a dealership in the last two years per GMVIS.

BrandonVeuleman /PAR/ATX

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:52 PM	DRAHEICM	VEULEMBR	BRC PAR	Initial Contact- AVM	Done	5/14/2008 04:23:25 PM	Message Left

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

CRS left message for DVM:
Adams Jack 914055 8037

CRS sts: This call is an FYI to adv you that a has filed a product allegation claim stating that a possible manufacturing concern with his 2005 Chevrolet Malibu caused the steering wheel to lock up while he was driving, resulting in a collision and serious injuries to the customer. The last 8 of the VIN is: 5F128981 - The customer has not been to a dealership regarding this issue, and has not been to a dirship in the last two years. Due to the nature of the allegation and the injuries involved w/ this case I will be forwarding this case to ESIS. At this time I have just received the file but if you have any questions or information in regards to the case please call me at (866) 790-5700 ext 41170, the service request number is 71-625686343. Thank you.

Brandon Veuleman /PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:47 PM	DRAHEICM	VEULEMBR	BRC PAR	Acknowledgement	Done	5/14/2008 04:05:00 PM	Acknowledgement Made

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

See Initial Contact Customer

BrandonVeuleman/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:43 PM	DRAHEICM	VEULEMBR	Notify CRM		Done	5/14/2008 02:20:20 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:38 PM	DRAHEICM	VEULEMBR	Research		Done	5/14/2008 03:45:24 PM	research vin

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS researched Cust's VIN:

* No previous SR's

* No Open Recalls

* No Related Issues on veh's claim history.

BrandonVeuleman/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 01:09:09 PM	DRAHEICM	VEULEMBR	BRC PAR	Case Assigned	Done	5/14/2008 02:20:15 PM	assigned to brandon veuleman ext41170

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 12:36:09 PM	DRAHEICM	RIVARA	SR Opened		Done	5/14/2008 12:36:09 PM	SR In Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/14/2008 12:36:08 PM	DRAHEICM	RIVARA	SR Closed - Dissatisfied		Done	5/14/2008 12:36:08 PM	Service Request has been Closed Dissatisfied.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/6/2008 10:49:00 PM	RIVARA	DRAHEICM	Escalation	Initiate PAR	Done	5/14/2008 12:35:49 PM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
5/6/2008 10:35:06 PM	RIVARA	RIVARA	Inbound Call Customer	Complex Request	Done	5/6/2008 10:50:45 PM	Alleged product allegation (Steering Wheel Lock-up)

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Cust Sts:
>I have a 2005 Chevrolet Malibu, got into a collision a month & a half ago, I was rushed to a hospital & has been on intensive care unit for 3 days due to neck & shoulder injuries, the collision that took place is because my steering wheel has locked up

Cust Seeks:
>assistance

CRS Advsd:
>apologized for this inconvenience
>will escalate this case to our Product Allegations Dept & they will be in contact with you within 2 business days

RainAnderson<rain riva>/CAC Tier1/MLA

Confidential Comments

Service Request Detail

UCC Information

UCC Code	Symptom	Description
M01	No Symptom Indicated	Steering - General

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZS52F25F[redacted]

VEHICLE INFORMATION

Merchandising Model :	1ZS69 -2005 MALIBU BASE SEDAN	Warranty Start Date :	02/21/2005
BARS Order Type :	70 - RETAIL - STOCK		
Delivering Dealer :	DON ALLEN CHEVROLET/OLDSMOBILE 5315 BAUM BLVD PITTSBURGH , PA 15224-2305 (412) 681-4800	Selling Source :	13 - CHEVROLET
		Site Code :	13011
		Business Associate Code :	113424

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Vehicle Has No Current Record Of Outstanding Campaigns

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	02/21/2005	210 miles	02/21/2008	36210 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	02/21/2005	210 miles	02/21/2011	100210 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	02/21/2005	210 miles	02/21/2013	80210 miles
36/36000 FEDERAL EMISSION	02/21/2005	210 miles	02/21/2008	36210 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
01/11/2006	303299	#	N0657 - BULBS, ONE OR ALL LICENSE LAMP - REPLACE	10752 miles

08/16/2005	293725	#	D0890 - BLOWER MOTOR CONTROL MODULE REPLACEMENT	5887 miles
08/16/2005	293725	#	C6620 - PANEL, SEAT BACK OF BACK - PASSENGER - R&R OR REPLACE	5887 miles
01/03/2005	278814	#	J6360 - POWERTRAIN CONTROL MODULE REPLACEMENT	205 miles
08/18/2004	250398	I	Z6999 - PDI RELATED FLUID ADDS	3 miles
08/09/2004	A28981	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System
Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZS52F25F[redacted]

CLAIM HISTORY

Repair Order Date :	01/11/2006	Repair Order Number :	303299	Odometer Reading :	10752 miles
Serviced By :	DON ALLEN CHEVROLET/OLDSMOBILE 5315 BAUM BLVD PITTSBURGH, PA 15224-2305 (412) 681-4800	Selling Source :	13 - CHEVROLET		
		Site Code :	13011		
		Business Associate Code :	113424		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
01/17/2006	657	01	#	N0657 - BULBS, ONE OR ALL LICENSE LAMP - REPLACE	09421330 - BULB	N/A	N/A	$ 14.99	N

Repair Order Date :	08/16/2005	Repair Order Number :	293725	Odometer Reading :	5887 miles
Serviced By :	DON ALLEN CHEVROLET/OLDSMOBILE 5315 BAUM BLVD PITTSBURGH, PA 15224-2305 (412) 681-4800	Selling Source :	13 - CHEVROLET		
		Site Code :	13011		
		Business Associate Code :	113424		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
08/23/2005	615	01	#	D0890 - BLOWER MOTOR CONTROL MODULE REPLACEMENT	22688135 - RESISTOR	N/A	N/A	$ 49.28	N
08/23/2005	615	02	#	C6620 - PANEL, SEAT BACK OF BACK - PASSENGER - R&R OR REPLACE	15226958 - RETAINER	N/A	N/A	$ 25.44	N

Repair Order Date :	01/03/2005	Repair Order Number :	278814	Odometer Reading :	205 miles
Serviced By :	DON ALLEN CHEVROLET/OLDSMOBILE 5315 BAUM BLVD PITTSBURGH, PA 15224-2305 (412) 681-4800	Selling Source :	13 - CHEVROLET		
		Site Code :	13011		

					Business Associate Code :	113424			
Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
01/14/2005	552	01	#	J6360 - POWERTRAIN CONTROL MODULE REPLACEMENT	12589320 - PCM	N/A	N/A	$ 439.68	N

Repair Order Date :	08/18/2004	Repair Order Number :	250398	Odometer Reading :	3 miles
Serviced By :	SERPENTINI CHEVROLET OF WADSWORTH PO BOX 149 WADSWORTH, OH 44282-0149 (330) 334-1515	Selling Source :	13 - CHEVROLET		
		Site Code :	28581		
		Business Associate Code :	113626		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
08/20/2004	510	01	I	Z6999 - PDI RELATED FLUID ADDS	N/A	N/A	N/A	$ 1.81	N

Repair Order Date :	08/09/2004	Repair Order Number :	A28981	Odometer Reading :	0 miles
Serviced By :	SERPENTINI CHEVROLET OF WADSWORTH PO BOX 149 WADSWORTH, OH 44282-0149 (330) 334-1515	Selling Source :	13 - CHEVROLET		
		Site Code :	28581		
		Business Associate Code :	113626		

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
08/13/2004	508	01	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	N/A	N/A	N/A	$ 90.32	N

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System
Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN	1G1ZS52F25F[redacted]

VEHICLE BUILD

Merchandising Model :	1ZS69 -2005 MALIBU BASE SEDAN		
Gross Vehicle Weight Rating :	1841 kg (4059 lb)	Order Number :	HKCZQR
Build Date :	08/09/2004	Build Plant :	15FZ

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AK5 - DRIVER & PASS FRONT AIR BAGS	A51 - SEATS, CUSTOM
C60 - AIR CONDITIONING	DL5 - ROADSIDE SERVICE INFORMATION DECAL
D49 - POWER OUTSIDE MIRRORS	FAI - FAIRFAX
FE0 - SUSPENSION SYSTEM-ACTIVE	FE9 - 50-STATE EMISSIONS
FY1 - TRANS/AXLE 3.63 RATIO	JBD - INTERIOR TRIM
J41 - BRAKES, FRONT DISC, REAR DRUM	K64 - GENERATOR 115 AMPS
L61 - 2.2L 4 CYL ENGINE	MN5 - TRANSMISSION AUTO 4 SPEED
MX0 - 4-SPEED AUTO TRANSMISSION	NT9 - FED EMIS SYS, TIER 2 PHASE-OUT
N46 - STEERING WHEEL	PA7 - (4) 15" WHEELS W/BOLT ON COVERS
QMR - (4) TOURING TIRES P205/65R15	SLM - STOCK ORDERS
UW4 - SPEAKER SYSTEM 4, CUSTOM	U1C - AM/FM STEREO W/CD PLAYER
U77 - ANTENNA RR WINDOW	VK3 - FRONT LICENSE PLATE BRACKET
VM3 - CONSUMER INFORMATION LABEL	V73 - STATEMENT OF VEHICLE CERT.- U.S. /CANADA
1SA - MALIBU BASE EQUIPMENT GROUP	1SZ - PREFERRED EQUIPMENT SAVINGS PREFERRED EQUIPMENT GROUP SAVINGS
12U - GALAXY SILVER METALLIC	14D - GRAY CLOTH
14I - GRAY INTERIOR TRIM	6AK - FRONT SPRING
7AK - FRONT SPRING	8AB - REAR SPRING
9AB - REAR SPRING	

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Yvette Young
Claims Administrator

August 5, 2008

[redacted]
Pittsburgh PA [redacted]

RE: Claimant: [redacted]
Our File No.: 654468
Our Client: General Motors Corporation
Date/Event: 1/21/08

Dear [redacted]

I am writing to you in reference to a recent claim that you put General Motors on notice of regarding your accident of 1/21/08 in a 2005 Chev Malibu. I have not heard from you regarding your claim and I have not received the location of your vehicle.

Please contact me at 1.800.888.0164, Monday through Friday, 8:00 a.m. to 4:00 p.m., EST. to further discuss the details of your accident. If I do not hear from you within 30 days, I will assume you are no longer pursuing a claim and close my file.

Please be advised that you have an obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their immediate post-incident condition for as long as you intend to pursue a claim and/or cause of action.

Sincerely,

Yvette Young
Claims Administrator

GRINNELL MUTUAL REINSURANCE COMPANY

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641-269-8000

Received from MSX

June 12, 2008

GENERAL MOTORS CORPORATION
ATTN: CLAIMS DEPARTMENT
PO BOX 33170
DETROIT, MI 48232-5170

RECEIVED
JUN 19 2008
ESIS-GM CLAIMS UNIT

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No: [redacted]
Loss Date: 06/10/2008
Claimant: [redacted]

Dear Sir or Madam:

We have been called upon by our insured to make property damage payments under their Personal Auto Policy.

Our investigation has revealed that a malfunction of the power steering assist system in our insured's 2005 Pontiac G6 was the proximate cause of this accident. If you would like the opportunity to inspect this vehicle, please contact me within 30 days.

We are subrogated to the rights of our insured and are putting you on notice of our subrogation claim. Once the total damages have been ascertained we will send you our supporting documents.

Sincerely,

Anna Miller

Anna Miller
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: amiller@gmrc.com

Certificate of Mailing

esis

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Yolanda Allen
Claims Administrator

July 31, 2008

Attn: Anna Miller
Grinnell Mutual
P.O. Box 790
Grinnell, IA 50112-0790

RE: Claimant: [redacted]
Our File No.: 656412
Our Client: General Motors Corporation
Date/Event: 6/10/08
Subject vehicle: 2005 Pontiac G6
Your File No.: PA00023496

Dear Ms. Miller:

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors. Your correspondence alleges that you sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

****IF AN INSURANCE COMPANY OR AN ATTORNEY IS REPRESENTING YOU, PLEASE FORWARD THIS LETTER TO THE APPROPRIATE PARTY FOR FURTHER HANDLING****

1. Please provide a copy of your expert report and color copies of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

esis

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage estimate and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Yolanda Allen

Yolanda Allen
Claims Administrator

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641-269-8000

August 20, 2008

ESIS/GM CENTRAL CLAIMS UNIT
PO BOX 300
MAIL CODE 482 C19 B61
DETROIT, MI 48265-3000

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No:
Loss Date: 06/10/2008
Your File No.: 656412

Dear Ms. Allen:

I am in receipt of your request for additional documentation regarding the above referenced claim.

Enclosed please find a copy of the accident report from the Buchanan County Sheriff's Office and a copy of the correspondence received by our insured, [redacted] from General Motors regarding possible problems with the power steering assist on 2005 model year Pontiac G6 vehicles. Our insured did not receive any other Recall Notices.

I have also included a CD containing the recorded statement taken from our insured driver, [redacted] and her father, [redacted] have stated that they had not noticed anything unusual about the vehicle prior to the accident. Please be advised that neithe[redacted] nor the driver of the other vehicle involved in the accident were injured. Neither vehicle had any passengers.

Also enclosed are copies of the estimates for both vehicles involved in the accident as well as color photos of the damages. Our insured vehicle was a total loss and copies of the N.A.D.A. Vehicle Appraisal and Salvage Sheet have been included. Copies of all payments are enclosed.

Please be advised that we are in the process of obtaining the additional requested information from our insured. That information will be forwarded when available.

Grinnell Mutual Group

If you have any questions, please call me.

Sincerely,

Anna Pinkerton

Anna Pinkerton
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: apinkerton@gmrc.com

Enc. Accident Report
Correspondence from GM
CD of Recorded Statement
Color Photos
Salvage Sheet, N.A.D.A. Vehicle Appraisal, & Estimates
Copies of Payments

Office of Driver Services
P.O. Box 9204
Des Moines, Iowa 50308-9204

The Department of Transportation
INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement Case Number: 08006900

Legal Intervention? ☐ Private Property? ☐

LOCATION

Date of Accident	Time of Accident	County	Accident occurred within corporate limits of (city)
06/10/08	20:09 Hrs.	Buchanan - 10	

If accident occurred outside of city limits show general vicinity: "N/A" of nearest city "N/A"

On Road, Street, or Highway: "N/A" At Intersection with: "N/A"

Note: Unless accident occurred at an intersection which is completely described above, use the space below to give the exact location from a milepost or definable intersection, bridge, or railroad crossing, using two distances and directions if necessary

Distance "N/A" Direction "N/A" and Distance "N/A" Direction "N/A" of

Milepost Number "N/A" Or Definable intersection, bridge, or railroad crossing "N/A"

Location Literal Description: V071 / DUGAN AVE and D022 / 220TH ST

X-Coordinate: 00581614
Y-Coordinate: 04702208

If Divided Highway, Provide Route (Cardinal) Travel Direction: "N/A"

UNIT 001

Driver's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Phone: [redacted]
Address: [redacted] City: BRANDON State: IA Zip: [redacted]
Date of Birth: [redacted] Driver's License Number: [redacted]
Gender: Female State: IA Class: C Endorsements: NONE Restrictions: BY
Alcohol Test Given?: 1 - None Test Results: Drug Test Given?: 1 - None Test Results:
Citation Charge Code 1 / Citation Charge 1
Citation Charge Code 2 / Citation Charge 2
Citation Charge Code 3 / Citation Charge 3
Citation Charge Code 4 / Citation Charge 4
Seating Position 01 Injury Status 4 Occupant Protection 2 Airbag Deployment 5 Airbag Switch Status 3 Ejection 1 Ejection Path 1 Trapped 1
Transported to: Transported by:
Owner's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Owner Company Name:
Address: [redacted] City: BRANDON State: IA Zip: [redacted]
Insurance Co. Name: GRINNELL MUTUAL Insurance Policy #: 940008 7480-ELITE License Plate #: [redacted] State: IA Year: [redacted]
VIN No.: 1G2ZH528 [redacted] Year: 2008 Make: Pontiac - PONT Model: G6 Style: 4D
Tow #: NO Approximate Cost to Repair or Replace: $5,500.00 Private? ☒
Initial Travel Direction: 3 Vehicle Action: 03 Speed Limit: 55 Point of Initial Impact: 02 Most Damaged Area: 02 Extent of Damage: 4 Underride/Override: 1
Total Occupants: 01 Traffic Controls: 01 Vehicle Config.: 01 Cargo Body Type: 01 Vehicle Defect: 99 Driver Condition: 1 Vision Obscured: 01 Contributing Circumstances, Driver (up to two): 07
SEQUENCE OF EVENTS: First Event 21 Second Event Third Event Fourth Event Most Harmful Event (by vehicle) 21
Commercial Trailer License Plate #: Attached to Power Unit: State Year Attached to Trailer Unit: State Year Emergency Vehicle Type: 1 Emergency Status: 3
Carrier Name Address City State Zip
US DOT # or MC # Number of Axles Gross Vehicle Weight Rating Placard # Hazardous Materials Released?

UNIT 002

Driver's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Phone: [redacted]
Address: [redacted] City: ROWLEY State: IA Zip: [redacted]
Date of Birth: [redacted] Driver's License Number: [redacted]
Gender: Male State: IA Class: B Endorsements: NONE Restrictions: NONE
Alcohol Test Given?: 1 - None Test Results: Drug Test Given?: 1 - None Test Results:
Citation Charge Code 1 / Citation Charge 1
Citation Charge Code 2 / Citation Charge 2
Citation Charge Code 3 / Citation Charge 3
Citation Charge Code 4 / Citation Charge 4
Seating Position 01 Injury Status 5 Occupant Protection 2 Airbag Deployment 5 Airbag Switch Status 1 Ejection 1 Ejection Path 1 Trapped 1
Transported to: Transported by:
Owner's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Owner Company Name:
Insurance Co. Name: PROGRESSIVE CASUALTY City: ROWLEY State: IA Zip: [redacted]
Insurance Policy #: License Plate #: [redacted] State: IA Year: 2009
VIN No.: 1GCEK19T722 [redacted] Year: 2002 Make: Chevrolet - CHEV Model: SLV Style: PK
Tow #: NO Approximate Cost to Repair or Replace: $3,500.00 Private? ☐
Initial Travel Direction: 1 Vehicle Action: 10 Speed Limit: 55 Point of Initial Impact: 02 Most Damaged Area: 02 Extent of Damage: 2 Underride/Override: 1
Total Occupants: 01 Traffic Controls: 01 Vehicle Config.: 02 Cargo Body Type: 01 Vehicle Defect: 01 Driver Condition: 1 Vision Obscured: 01 Contributing Circumstances, Driver (up to two): 28
SEQUENCE OF EVENTS: First Event 21 Second Event Third Event Fourth Event Most Harmful Event (by vehicle) 21
Commercial Trailer License Plate #: Attached to Power Unit: State Year Attached to Trailer Unit: State Year Emergency Vehicle Type: 1 Emergency Status: 3
Carrier Name Address City State Zip
US DOT # or MC # Number of Axles Gross Vehicle Weight Rating Placard # Hazardous Materials Released?

Owner's Name - Last	First	Middle	Suffix	Damage	Was owner or tenant notified?
Street or RFD		City		Company Owner Name	State / Zip Code

ACCIDENT ENVIRONMENT

Location of First Harmful Event	1	Weather Conditions (up to two)	02
Manner of Crash/Collision	2		
Light Conditions	1	Surface Conditions	1

ROADWAY CHARACTERISTICS

Major Contributing Circumstances Environment	1
Roadway	01
Type of Roadway Junction/Feature	12

WORKZONE RELATED? No

Location

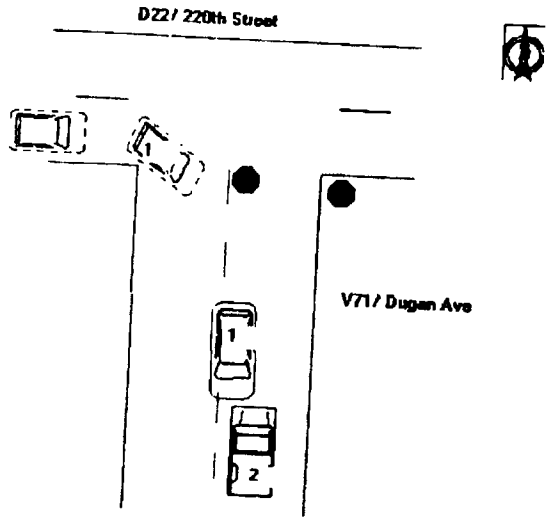
Type

Workers Present?

SEQUENCE OF EVENTS

First Harmful Event of Crash (use codes 11-42 only) 21

DIAGRAM



NARRATIVE

Describe what happened (refer to vehicles by number)

UNIT 1 WAS TRAVELING EAST BOUND ON D22 AND ATTEMPTING TO MAKE A RIGHT TURN ONTO V71. AFTER MAKING THE RIGHT TURN UNIT 1 ACROSSED THE CENTER LINE AND WENT INTO THE PATH OF UNIT 2. UNIT 1 THEN STRUCK UNIT 2 IN A HEAD ON COLLISION CAUSING DAMAGE TO BOTH VEHICLES. NO INJURIES WERE REPORTED AT THE TIME OF THE ACCIDENT.

WITNESS

Witness Name - Last	First	Middle	Suffix
[redacted]	[redacted]		
Address: [redacted]	City: JESUP	State: IA	Zip Code
Home Phone #: [redacted]	Work Phone #		

Officer: Schwinghammer Joe	Badge No.: S6039	Time Officer Notified of Accident: 20:09 Hrs.	Time Officer Arrived At Scene: 20:21 Hrs
Name of Agency: Buchanan Cnty Sheriff's Office	Date of Report: 06/10/2006	Investigation made at scene? Yes	T.I. #
Report Reviewed By:	Date Reviewed	Agency Specific	Other Technical Investigation Agency: Buchanan Cnty Sheriff's Office

Attention

Anna Miller

90-23-90

Printed At: Buchanan Cnty Sheriff's Office 06/16/2006 11:37 AM

Form #: 08006900

0-08

December 2007

[redacted]

Brandon, IA [redacted]

Dea[redacted]

As the owner of a 2005 model year Pontiac G6, your satisfaction with our product is very important to us.

This letter is intended to make you aware that some 2005 model year Pontiac G6 vehicles may lose their power steering assist. This is caused by electrical input signals within the steering column assembly. If the power steering assist is lost, a chime will be heard and the DIC will display a Power Steering warning message. The Service Vehicle Soon light will also illuminate. The vehicle can still be steered in a safe manner but will require greater driver effort at low vehicle speeds or when stopped.

Do not take your vehicle to your Pontiac dealer as a result of this letter unless you believe that your vehicle has the condition as described above.

What We Have Done: General Motors is providing owners with additional protection for the steering column assembly. If this condition occurs on your 2005 Pontiac G6 within 7 years of the date your vehicle was originally placed in service or 70,000 miles, whichever occurs first, the condition will be repaired for you at **no charge**. Diagnosis or repair for conditions other than the condition described above is not covered under this special coverage program.

What You Should Do: Repairs and adjustments qualifying under this special coverage must be performed by a General Motors dealer. You may want to contact your GM dealer to find out how long they will need to have your vehicle so that you may schedule the appointment at a time that is convenient for you. This will also allow your dealer to order parts if they are not already in stock. Keep this letter with your other important glove box literature for future reference.

Reimbursement: The enclosed form explains what reimbursement is available and how to request reimbursement if you have paid for repairs for the special coverage condition. Your request for reimbursement, including the information and documents mentioned on the enclosed form, must be received by GM by December 31, 2008.

If you have any questions or need any assistance, just contact your dealer or the Pontiac Customer Assistance Center between the hours of 8:00 AM and 11:00 PM, EST, Monday through Friday. They can be reached at 1.800.620.7668 (TTY 1.800.833.7668).

P.O. Box 33172 · Detroit, MI 48232-5172

JUN 13 08

Date: 6/13/2008 06:48 AM
Estimate ID: 12694
Estimate Version: 0
Preliminary
Profile ID: Mitchell

HILLTOP MOTORS, INC.

512 20th. AVE. S.W., INDEPENDENCE, IA 50644
(319) 334-2337
Fax: (319) 334-5985

Damage Assessed By: DON MAGSAMEN

Deductible: 0.00
Claim Number: 12694

Insured: [redacted]
Address:
Telephone: Home Phone: [redacted]

Mitchell Service: 910410

Description: 2005 Pontiac G6 GT
Body Style: 4D Sed
VIN: 1G2ZH528954[redacted]
Drive Train: 3.5L Inj 6 Cyl 4A FWD
Options: ALUM/ALLOY WHEELS, POWER DRIVER SEAT

Line Item	Entry Number	Labor Type	Operation	Line Item Description	Part Type/ Part Number		Dollar Amount	Labor Units
1	AUTO	BDY	OVERHAUL	FRT BUMPER COVER ASSY				2.8 #
2	000008	BDY	REMOVE/REPLACE	FRT BUMPER COVER	19120467	GM PART	398.08	INC #
3	AUTO	REF	REFINISH	FRT BUMPER COVER				C 2.6
4	000026	BDY	REMOVE/REPLACE	FRT BUMPER NUT 8@0.56	11515638	GM PART	4.48	INC
5	003434	BDY	REMOVE/REPLACE	FRT BUMPER SUPPORT	15234066	GM PART	41.30	INC
6	000009	BDY	REMOVE/REPLACE	FRT UPR BUMPER COVER RETAINER 6@2.12	11518017	GM PART	12.72	INC
7	000011	BDY	REMOVE/REPLACE	FRT BUMPER ADHESIVE EMBLEM	22689321	GM PART	35.50	INC
8	000012	BDY	REMOVE/REPLACE	FRT BUMPER IMPACT ABSORBER	22624987	GM PART	134.70	INC
9	000016	BDY	REMOVE/REPLACE	L FRT BUMPER BRACKET	22703311	GM PART	16.06	INC #
10	000021	BDY	REMOVE/REPLACE	FRT BUMPER SPLASH SHIELD	15859479	GM PART	78.21	INC
11	003288	BDY	REMOVE/REPLACE	FRT AMBIENT TEMP SENSOR	22697635	GM PART	12.46	INC #
12	000025	BDY	REMOVE/REPLACE	FRT BUMPER RIVET 4@0.70	22638717	GM PART	2.80	INC
13	000024	BDY	REMOVE/REPLACE	FRT BUMPER LICENSE BRACKET	10379556	GM PART	8.45	INC
14	000028	BDY	REMOVE/REPLACE	L OTR UPR GRILLE	15221711	GM PART	36.21	INC #
15	000030	BDY	REMOVE/REPLACE	L INR UPR GRILLE	22699329	GM PART	32.87	INC #
16	002489	BDY	REMOVE/REPLACE	L LWR GRILLE	15243288	GM PART	57.08	INC #
17	000034	BDY	REMOVE/REPLACE	L FRONT COMBINATION LAMP ASSEMBLY	15881657	GM PART	248.65	INC
18	AUTO	BDY	CHECK/ADJUST	HEADLAMPS				0.4
19	000057	BDY	REMOVE/REPLACE	FRONT COMBINATION LAMP WIRING HARNESS	15257561	GM PART	125.33	
20	000051	BDY	REMOVE/REPLACE	L FRT FOG LAMP ASSEMBLY	15162675	GM PART	157.10	INC #
21	000058	BDY	REMOVE/REPLACE	HOOD PANEL	15801208	GM PART	384.12	1.0
22	AUTO	REF	REFINISH	HOOD OUTSIDE				C 2.5
23	AUTO	REF	REFINISH	HOOD UNDERSIDE				C 1.3
24	000059	BDY	REMOVE/REPLACE	HOOD INSULATOR	25809559	GM PART	43.95	INC
25	000060	BDY	REMOVE/REPLACE	HOOD INSULATOR RETAINER 4@1.69	22718305	GM PART	6.76	
26	000061	BDY	REMOVE/REPLACE	R INR HOOD HINGE	15143682	GM PART	17.79	0.2 #
27	AUTO	REF	REFINISH	R INR HINGE				C 0.5
28	000062	BDY	REMOVE/REPLACE	L INR HOOD HINGE	15143683	GM PART	17.82	0.2 #
29	AUTO	REF	REFINISH	L INR HINGE				C 0.5
30	000063	BDY	REMOVE/REPLACE	R OTR HOOD HINGE	22701366	GM PART	19.47	INC #
31	AUTO	REF	REFINISH	R OTR HINGE				C 0.5

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12694

Mitchell Data Version: MAY_08_A
UltraMate Version: 6.0.029

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DAC JUN 25 2008

Date: 6/13/2008 06:48 AM
Estimate ID: 12694
Estimate Version: 0
Preliminary
Profile ID: Mitchell

32	000064	BDY	REMOVE/REPLACE	L OTR HOOD HINGE		22701367	GM PART	19.47	INC #
33	AUTO	REF	REFINISH	L OTR HINGE					C 0.5
34	002494	BDY	REMOVE/REPLACE	FRT HOOD RETAINER 4@2.84		11610086	GM PART	11.36	
35	000079	BDY	REMOVE/REPLACE	HOOD LATCH		15876265	GM PART	57.71	INC #
36	000081	BDY	REMOVE/REPLACE	HOOD RELEASE CABLE		25817511	GM PART	21.48	0.8
37	000082	BDY	REMOVE/REPLACE	COOLING RADIATOR		52494386	GM PART	332.59	INC #
38	000089	BDY	REMOVE/REPLACE	L COOLING RADIATOR BAFFLE		22705986	GM PART	3.55	
39	000117	MCH	REMOVE/REPLACE	AIR COND CONDENSER -M		15777890	GM PART	346.47	INC #
40	AUTO	MCH	REMOVE/REPLACE	EVACUATE & RECHARGE A/C -M					1.4
41	000137	BDY	REPAIR	R FENDER PANEL		Existing			2.0* #
42	AUTO	REF	REFINISH	R FENDER OUTSIDE					C 1.5
43	000138	BDY	REMOVE/REPLACE	L FENDER PANEL		15292019	GM PART	169.30	1.2 #
44	AUTO	REF	REFINISH	L FENDER OUTSIDE					C 1.5
45	AUTO	REF	REFINISH	L FENDER EDGE					0.5
46	000146	BDY	REMOVE/REPLACE	L FENDER LINER		25860275	GM PART	38.32	INC
47	003095	BDY	REMOVE/REPLACE	L FENDER WHEELHOUSE PANEL		25779654	GM PART	17.77	0.8 #
48	000163	BDY	REMOVE/REPLACE	UPR FRONT BODY TIE BAR -S		25800756	GM PART	206.61	5.9 #
49	AUTO	REF	REFINISH	UPPER TIE BAR					1.0
50	AUTO	MCH	REMOVE/REPLACE	ADD TO R&R MECHANICAL COMPONENTS -M					0.6 #
51	AUTO	REF	REFINISH	L APRON/SIDEMEMBER COMPLETE					1.5
52	001067	BDY	REPAIR	L FRONT BODY SIDE RAIL -S		Existing			4.0* #
53	003085	BDY	REMOVE/REPLACE	L ENGINE SHIELD		15809317	GM PART	21.78	0.2
54	001084	BDY	REPAIR	R UPR FRONT BODY SIDE RAIL -S		Existing			2.0*
55	AUTO	REF	REFINISH	R UPR SIDE RAIL					0.5
56	001085	BDY	REMOVE/REPLACE	L UPR FRONT BODY SIDE RAIL -S		10375729	GM PART	209.60	INC
57	001087	BDY	REMOVE/REPLACE	L FRONT BODY BAFFLE -S		15895558	GM PART	5.51	1.0
58	003091	BDY	REMOVE/REPLACE	L FRONT BODY WHEELHOUSE ASSY -S		15800731	GM PART	147.90	7.0 #
59	003093	BDY	REMOVE/REPLACE	L PANEL BONDING ADHESIVE		12378567	GM PART	76.95	
60	000153	MCH	REMOVE/REPLACE	FUSE BOX -M		22731137	GM PART	287.76	1.2 #
61	001590	MCH	REMOVE/REPLACE	ENGINE WIRING HARNESS -M		ORDER FROM DEALER		207.67	
62	001587	MCH	REMOVE/REPLACE	WIRING HARNESS -M		ORDER FROM DEALER		1,317.08	
63	AUTO	MCH	REMOVE/REPLACE	L FRT SUSP COMPONENTS ONE SIDE -M					
64				DOES NOT INCLUDE ALIGNMENT					3.7
65	001338	MCH	ALIGN	FOUR WHEEL -M					
66	000194	MCH	REMOVE/REPLACE	L FRT SUSP HUB & BEARING -M					2.7
67	000256	MCH	REMOVE/REPLACE	L FRT SUSP STRUT ASSY -M		15793213	GM PART	272.34	INC #
68	000278	MCH	REMOVE/REPLACE	L LWR FRT SUSP CONTROL ARM ASSY -M		22716370	GM PART	160.78	INC #
69	000348	BDY	REMOVE/REPLACE	AIR CLEANER INTAKE DUCT		22730775	GM PART	193.57	INC #
70	000388	BDY	REMOVE/REPLACE	BATTERY		22689639	GM PART	65.32	INC
71	002782	BDY	REMOVE/REPLACE	POSITIVE BATTERY CABLE		N.A.	GM PART	105.00 *	INC
72	000390	BDY	REMOVE/REPLACE	NEGATIVE BATTERY CABLE		88861297	GM PART	29.64	0.6
73	000391	BDY	REMOVE/REPLACE	BATTERY COVER		88987120	GM PART	44.38	0.4
74	000162	BDY	REMOVE/REPLACE	BATTERY TRAY		22731886	GM PART	40.35	
75	000392	BDY	REMOVE/REPLACE	RETAINER		15217067	GM PART	41.67	INC #
76	000393	BDY	REMOVE/REPLACE	SUPPORT		22593091	GM PART	7.46	
77	000394	BDY	REMOVE/REPLACE	DUCT		22731258	GM PART	43.88	
78	003854	GLS	REMOVE/REPLACE	W/SHIELD GLASS		22660814	GM PART	8.82	
79	900500	GLS *	REMOVE/REPLACE	W/S SEAL KIT		DW01603GTY		303.75	2.3 #
80	001095	BDY	REPAIR	COWL/DASH PLENUM PANEL		New		25.00 *	0.0*
81	000541	BDY	REPAIR	L FRT DOOR REPAIR PANEL		Existing			5.0*
82	AUTO	REF	REFINISH	L FRT DOOR OUTSIDE		Existing			2.0* #
83	001229	BDY	REMOVE/INSTALL	L FRT REAR VIEW MIRROR					C 1.6
84	001223	BDY	REMOVE/INSTALL	L FRT OTR BELT MOULDING					INC #
85	001225	BDY	REMOVE/INSTALL	L FRT UPR DOOR GLASS REVEAL MOULDING					INC #
86	001227	BDY	REMOVE/INSTALL	L FRT DOOR REAR APPLIQUE					INC #
87	002485	BDY	REMOVE/REPLACE	L FRT DOOR ADHESIVE NAMEPLATE					1.2 #
88	001237	BDY	REMOVE/INSTALL	L FRT OTR DOOR HANDLE		15223484	GM PART	4.75	0.2
89	936018		ADD'L COST	R134A FREON & OIL					0.3 #
90	AUTO	REF	ADD'L OPR	CLEAR COAT				50.00 *	
91	AUTO		ADD'L COST	PAINT/MATERIALS					3.1
								627.20 *	

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12694

Mitchell Data Version: MAY_08_A
UltraMate Version: 6.0.029

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DAC JUN 25 2008

Date: 6/13/2008 06:48 AM
Estimate ID: 12694
Estimate Version: 0
Preliminary
Profile ID: Mitchell

92 AUTO ADD'L COST HAZARDOUS WASTE DISPOSAL 3.00 *

* - Judgment Item
\# - Labor Note Applies
C - Included in Clear Coat Calc

I. Labor Subtotals	Units	Rate	Add'l Labor Amount	Sublet Amount	Totals	
Body	39.2	50.00	0.00	0.00	1,960.00	T
Refinish	19.6	50.00	0.00	0.00	980.00	T
Glass	2.3	50.00	0.00	0.00	115.00	T
Mechanical	9.6	60.00	0.00	0.00	576.00	T
Taxable Labor					3,631.00	
Labor Tax		@	7.000 %		254.17	
Labor Summary	70.7				3,885.17	

II. Part Replacement Summary			Amount
Taxable Parts			6,737.24
Sales Tax	@	7.000%	471.61
Total Replacement Parts Amount			7,208.85

III. Additional Costs			Amount
Taxable Costs			53.00
Sales Tax	@	7.000%	3.71
Non-Taxable Costs			627.20
Total Additional Costs			683.91

IV. Adjustments	Amount
Insurance Deductible	0.00
Customer Responsibility	0.00

I.	Total Labor:	3,885.17
II.	Total Replacement Parts:	7,208.85
III.	Total Additional Costs:	683.91
	Gross Total:	11,777.93
IV.	Total Adjustments:	0.00
	Net Total:	11,777.93

This is a preliminary estimate.
Additional changes to the estimate may be required for the actual repair.

Inspection Date: 12/30/1999

HILLTOP MOTORS INC. WILL WARRANTY ALL LABOR, WORKMANSHIP, AND REFINISHING FOR UP TO ONE YEAR AFTER REPAIRS ARE COMPLETED.

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12694

Mitchell Data Version: MAY_08_A
UltraMate Version: 5.0.029

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N.A.D.A. Official Used Car Guide
Vehicle Appraisal Retail Value
6/13/2008

2005 PONTIAC
G6-V6
Sedan 4D GT

Region: Eastern June, 2008

VIN: 1G2ZH528954[redacted]

N.A.D.A. Base Clean Retail	**$13,475**
Mileage (30,000)	$950
Accessories	$1,075
N.A.D.A. Clean Retail Value	**$15,500**

Optional Equipment:

Leather Seats	$400	Power Sunroof	$550
Theft Recovery Sys	$125		
Option Total:	$1 075		

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[redacted]

PLEASE CHECK ONE COMPANY NAME BELOW
☐ Grinnell Mutual Reinsurance Company
☒ Grinnell Select Insurance Company
4215 Highway 146, PO Box 790, Grinnell, Iowa 50112-0790

SALVAGE SHEET

Claim No. DA00023491n
Insured [redacted]
Loss Date 6/10/08 Coverage Code 200-001

Owner [redacted] Vehicle Color Black Miles 30,000
Location of Auto Insd residence - [redacted] Town Brandon State IA
Year 2005 Make Pontiac Body G6 Series ____ VIN No. 1G2ZH528954 [redacted]
Engine 6 Cylinders/Liters 3.5L Condition ____ Transmission Auto Condition prior salvage
Tire Tread Remaining: RF ____ RR ____ LF ____ LR ____ Spare ____
Air Bag Deployed: ☐ Yes ☒ No If any – give location ____
Glass Broken: Windshield X Back ____ R Vent ____ RF ____ RR ____ L Vent ____ LF ____ LR ____ Back ____

PANEL CODES: X – Usable with Repair; None – None; NG – No Good; OK – Good Parts; PD – Prior Damage (Hrs.)

Top Panel		LF Fender		LR Door		RF Fender		RR Door		Trunk Lid	
Hood		LF Door		LR Quarter		RF Door		RR Quarter			

EQUIPMENT	ADD	DEDUCT
Moon/Sun Roof	550	
Alum/Chrome/Wheel		
AM/FM Ster, Tape/CD		
Power Window		
Power Door Locks		
Power Seat		
Cruise Control		
Tilt Wheel		
R. Window Defogger		
Manual Transmission		
Air Conditioner		
Gas/Diesel Engine		
4 x 4 Pkg.		
Running Boards		
Trailer Tow		
Box Liner		
Anti-Theft/ Alarm	125	
Leather	400	
Subtotal	1075	

EVALUATION OF AUTO

NADA Book Value (base) 15,500.00 Market Survey ____

ADD ON

Low Mileage 950
Equipment 1075
Subtotal 2025 + 2025

DEDUCTIONS

High Mileage ____
Equipment ____
Old Damage (minus) 3875 prior salv.
Subtotal 3875 - 3875
NADA Value 11,625

Settlement 11,625
Sales Tax ____
License ____
Subtotal ____
Paper Trans (Sales Value) - 2557.50
Ded. (Minus) - 500.00
TOTAL 8567.50

Stolen ☐

SALVAGE PICK-UP AUTHORIZATION

Salvor Retained by owner Control # ____
Date Notified ____ NADA Value 11,625 % 22 Amt. 2557.50
☐ Unit is Released, Forward Salvage Draft. ☐ Negotiable Unit
☐ **HOLD Unit Until Notified.**
Less Towing ____ Storage ____ Total ____
Comments: ____

Permission ☐ IS ☐ IS NOT – hereby granted to the insurance company listed above, or a representative thereof, to move the aforesaid vehicle as necessary.

Market Survey: 1. Dealer ____ Salesman ____
Location ____
Comments ____ Price ____
2. Dealer ____ Salesman ____
Location ____
Comments ____ Price ____

I have received a copy of this form and have had an opportunity to review the form in its entirety.

OWNER'S SIGNATURE ____ DATE 7/11/08 ADJUSTER'S SIGNATURE Anna Miller

ILLINOIS SPECIAL PROVISIONS – The Illinois Vehicle Code states any vehicle 9 (nine) model years of age or older may, by agreement between the registered owner and the insurance company, be retained by the registered owner of such vehicle.

"A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information or helps to commit a fraud against an insurer commits a crime."

2917 10-02

GRINNELL SELECT INSURANCE COMPANY

INSURED:	[redacted]			CHECK NUMBER [redacted]	DATE JULY 13, 2008
CLAIM NO.:	ACCIDENT DATE:	ADJ	TAXPAYER ID#	CHECK TOTAL:	$****7,312.78
PA00023496	06102008	AMI			

FOR: Loan Payoff for Loan # 4278410 for [redacted] for the 2005 Pontiac G6.

TO: ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

GROSS: $****7,312.78
WITHHELD: $*********.00
NET: $****7,312.78

Printed using Ameriseal

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 148, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

33-6/730 Bankers Trust Company, N.A.
Des Moines, IA

3001118444

CLAIM NO: PA00023496
TAX ID#:

DATE JULY 13, 2008

Pay ➡➡➡➡➡➡➡➡➡➡➡ $7,312.78
DOLLAR SEVEN COMMA THREE ONE TWO PERIOD CENTS CENTS

$****7,312.78

FOR Loan Payoff for Loan # 4278410 for Richard Ratchford for the 2005 Pontiac G6.

TO THE ORDER OF ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

HOME OFFICE COPY

VOID OVER $7,312.78

[redacted]

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 148, PO Box 790
Grinnell, Iowa 50112-0790
CLM#: PA00023496 ADJ: AMI

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

Jan 7-14-08

ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZH528954[redacted]

VEHICLE INFORMATION

Merchandising Model :	2ZH69 -2005 G6 - GT SEDAN	Warranty Start Date :	11/06/2004
BARS Order Type :	70 - RETAIL - STOCK		
Delivering Dealer :	RAMSEY PONTIAC 9625 HICKMAN RD URBANDALE , IA 50322-5301 (515) 278-6400	Selling Source :	16 - PONTIAC
		Site Code :	13389
		Business Associate Code :	116206

Service Contract :	No	Branded Title :	Yes	Warranty Block :	Yes	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
YT	04088	DRIVER DOOR WATER INTRUSION	N/A	Closed
RC	05005	REAR SEAT CHILD RESTRAINT ANCHORAGE OWNER MANUAL UPDATE	N/A	Closed

SERVICE INFORMATIONAL ITEMS

Type	Number	Description	Posted Date	Status
SB	06047	DETERMINE IF ONSTAR CAN BE UPGRADED AT GM GLOBALCONNECT-SEE TSB 05-08-46-006	02/21/2007	See Bulletin

ON STAR AND XM SATELLITE RADIO INFORMATION

OnStar Equipped	Yes	OnStar Status	Inactive	Refer to Help page for details or:go to OnStar Online Enrollment (located on the "OnStar" tab in GM InfoNET) or (888)ONSTAR1 (888) 667-8271.		
XM Equipped	No	XM Radio ID	N/A	XM Status	N/A	Refer to Help page for details or: www.xmradio.gm.ca or Dealer Hotline 1.877.GET.XMST (1-877-438-9677).

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	11/06/2004	49 miles	11/06/2007	36049 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	11/06/2004	49 miles	11/06/2010	100049 miles

[redacted]

96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	11/06/2004	49 miles	11/06/2012	80049 miles
36/36000 FEDERAL EMISSION	11/06/2004	49 miles	11/06/2007	36049 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
05/31/2005	036681	#	E2000 - WHEEL ALIGNMENT - STEERING WHEEL ANGLE AND/OR FRONT TOE AD	7400 miles
05/31/2005	036681	#	Z7911 - 2-WAY SHUTTLE COURTESY TRANSPORTATION	7400 miles
02/16/2005	028634	#	C2368 - GRILLE, DEFROSTER OUTLET (ONE OR BOTH) - REPLACE	3201 miles
01/06/2005	025542	#	B0485 - FRONT AIR DEFLECTOR REPLACEMENT	1936 miles
11/18/2004	022072	#	R4491 - TRANSMITTER, REMOTE DOOR/REAR COMPARTMENT LOCK - REPROGRAM	428 miles
11/11/2004	021460	#	Y0014 - DRIVER DOOR WATER INTRUSION - REPROGRAM BODY CONTROL MODUL	9 miles
10/18/2004	A26460	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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[redacted]

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Bethany Tillman
Claims Administrator

October 31, 2008

GRINNELL MUTUAL
ANNA MILLER
P.O. BOX 790
GRINNELL, IA, 50112-0790

RE:	Claimant:	[redacted]
	Our File No.:	656412
	Our Client:	General Motors Corporation
	Date/Event:	06/10/2008
	Subject vehicle:	2005 PONTIAC G6
	VIN:	1G2ZH528954[redacted]

Dear Ms. Miller:

ESIS is the third party administrator on behalf of General Motors. As we discussed, the above claim has been denied.

If you choose to pursue this matter further, you must maintain the vehicle in its immediate post-incident condition.

Thank you for your time in this regard.

Sincerely,

Bethany Tillman
Claims Administrator

GRINNELL MUTUAL
REINSURANCE SINCE 1909

Grinnell Mutual Reins rance Company
Grinnell Select Insura ce Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641 269-8000

September 8, 2008

RE(;EIVED
SE > 1 8 2008
ESIS-GI : CLAIMS UNIT

ESIS/GM CENTRAL CLAIMS UNIT
PO BOX 300
MAIL CODE 482 C19 B61
DETROIT, MI 48265-3000

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No: [redacted]
Loss Date: 06/10/2008

Dear Ms. Allen:

This letter is a follow up to your request for additional documentatio regarding the above referenced claim dated July 31, 2008.

Enclosed please find a note from our insured [redacted] cc ıcerning the vehicle involved in the loss. Please be advised that all maintenance, warra ty, and repair orders were lost in a shop fire that occurred prior to the auto accide t. The insured has stated that regular oil changes were completed every 3,000 miles a d the vehicle was also greased at the same times.

[redacted] has advised that no after-market equipment has ver been installed on the vehicle and no modifications were made.

[redacted] purchased the vehicle with prior damage to the left d or, quarter panel, and roof. There was no prior damage to the front end whatsoever. Ar. Ratchford completed all repairs on the vehicle himself.

If you have any questions, please contact me.

Sincerely,

Anna Pinkerton

Anna Pinkerton
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: apinkerton@gmrc.com

Enc. Correspondence from Richard Ratchford

2005 Pontiac G-6

ALL records were lost in shop fire. oil was changed every 3,000 and also was greased.

No after market EQIP. was installed on vehicle.

NO Modifications were Done to vehicle.

Prior Damage to Vehicle when I bought was in Left Door, roof and rear Quarter. NO Damage to front End or wheels.

8/22/08 [redacted]

GRINNELL MUTUAL
REINSURANCE SINCE 1909

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641-269-8000

November 13, 2008

ESIS/GM CENTRAL CLAIMS UNIT
PO BOX 300
MAIL CODE 482 C19 B61
DETROIT, MI 48265-3000

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No: [redacted]
Loss Date: 06/10/2008
Your File No: 656412

Dear Ms. Tillman:

Per your voicemail request on November 11, 2008, I have enclosed a CD of the recorded statement taken from our insured driver, [redacted], regarding the above accident.

If you have any questions, please call me.

Sincerely,

Anna Pinkerton

Anna Pinkerton
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: apinkerton@gmrc.com

Enc. CD – Recorded Statement of [redacted]

GRINNELL MUTUAL
REINSURANCE SINCE 1909

Grinnell Mutual Reins rance Company
Grinnell Select Insura ce Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641 269-8000

September 8, 2008

RECEIVED
SEP 18 2008
ESIS-GM CLAIMS UNIT

ESIS/GM CENTRAL CLAIMS UNIT
PO BOX 300
MAIL CODE 482 C19 B61
DETROIT, MI 48265-3000

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No: [redacted]
Loss Date: 06/10/2008

Dear Ms. Allen:

This letter is a follow up to your request for additional documentatio regarding the above referenced claim dated July 31, 2008.

Enclosed please find a note from our insured, [redacted] cc ncerning the vehicle involved in the loss. Please be advised that all maintenance, warra ty, and repair orders were lost in a shop fire that occurred prior to the auto accide t. The insured has stated that regular oil changes were completed every 3,000 miles a d the vehicle was also greased at the same times.

[redacted] has advised that no after-market equipment has ver been installed on the vehicle and no modifications were made.

[redacted] purchased the vehicle with prior damage to the left d r, quarter panel, and roof. There was no prior damage to the front end whatsoever. [redacted] completed all repairs on the vehicle himself.

If you have any questions, please contact me.

Sincerely,

Anna Pinkerton

Anna Pinkerton
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: apinkerton@gmrc.com

Enc. Correspondence from [redacted]

2005 Pontiac G-6
ALL records were lost
in shop fire. oil was
changed every 3,000 and
also was greased.

No after market EQIP.
was installed on vehicl.

NO Modifications were
Done to vehicle.

Prior Damage to Vehicle
when I bought was in
Left Door, roof and
rear Quarter. NO Damage
to front End or wheels.

8/22/05 [redacted]

Grinnell Mutual Reinsurance Company
4215 Highway 146, PO Box 790
Grinnell, IA 50112-0790
Phone (800) 362-2041
FAX 1-800-892-2302

facsimile transmission

To: Bethany Tillman **From:** Anna Pinkerton **Ext.:** 8194

Co.: **Dept.:** Claims **Date:** 12/15/08

Fax #: 313-665-0911 **Pages including this sheet:** 13

GMRC Claim No: PA00023496

Message:

Your claim # [redacted]

"A policy of working together"

GMRC 1356 9-92

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
4215 Highway 146
PO Box 790
Grinnell, IA 50112-0790
Phone 800-362-2041 or 641-269-8000

December 15, 2008

GENERAL MOTORS CORPORATION
ATTN: CLAIMS DEPARTMENT
PO BOX 33170
DETROIT, MI 48232-5170

Our Claim No: PA00023496
Our Insured: [redacted]
Our Policy No: [redacted]
Loss Date: 06/10/2008

Dear Sir or Madam:

We have been called upon by our insured to make property damage payments under the above Personal Auto policy. The total amount of the loss is $13,320.86, which includes our insured's $500 deductible, related storage expenses, and damage to the other vehicle involved in the accident.

The investigation of this accident reveals that a malfunction of the power steering assist system in our insured's 2005 Pontiac G6 was the proximate cause of this accident. We are subrogated to the rights of our insured and are pursuing our subrogation claim against you in the amount of $13,320.86. Enclosed please find our supporting documents.

Your prompt reply will be appreciated.

Sincerely,

Anna Pinkerton

Anna Pinkerton
Claims Adjuster
Phone: (800) 362-2041, Ext. 8194
Fax: (800) 892-2302
Email: amiller@gmrc.com

Enc. Copies of Estimates
Copies of Payments
Copy of Salvage Sheet

Date: 6/13/2008 06:48 AM
Estimate ID: 12894
Estimate Version: 0
Preliminary
Profile ID: Mitchell

HILLTOP MOTORS, INC.

512 20th AVE. S.W., INDEPENDENCE, IA 50644
(319) 334-2337
Fax: (319) 334-5985

Damage Assessed By: DON MAGSAMEN

Deductible: 0.00
Claim Number: 12894

Insured: [redacted]
Address:
Telephone: Home Phone: [redacted]

Mitchell Service: 910410

Description: 2005 Pontiac GRGT
Body Style: 4D Sed
VIN: 1G2ZH528954 [redacted]
Options: ALUM/ALLOY WHEELS, POWER DRIVER SEAT

Drive Train: 3.5L Inj 6 Cyl-4A RWD

Line Item	Entry Number	Labor Type	Operation	Line Item Description	Part Type/ Part Number		Dollar Amount	Labor Units
1	AUTO	BDY	OVERHAUL	FRT BUMPER COVER ASSY				2.2 #
2	000008	BDY	REMOVE/REPLACE	FRT BUMPER COVER	15120467	GM PART	398.08	INC #
3	AUTO	REF	REFINISH	FRT BUMPER COVER				C 2.8
4	000025	BDY	REMOVE/REPLACE	FRT BUMPER NUT 8@0.56	11515838	GM PART	4.48	INC
5	000034	BDY	REMOVE/REPLACE	FRT BUMPER SUPPORT	15234068	GM PART	41.00	INC
6	000009	BDY	REMOVE/REPLACE	FRT UPR BUMPER COVER RETAINER 6@2.12	11518017	GM PART	12.72	INC
7	000011	BDY	REMOVE/REPLACE	FRT BUMPER ADHESIVE EMBLEM	22648321	GM PART	35.50	INC
8	000012	BDY	REMOVE/REPLACE	FRT BUMPER IMPACT ABSORBER	22624987	GM PART	134.70	INC
9	000016	BDY	REMOVE/REPLACE	L FRT BUMPER BRACKET	22793311	GM PART	16.06	INC #
10	000021	BDY	REMOVE/REPLACE	FRT BUMPER SPLASH SHIELD	15859479	GM PART	78.21	INC
11	003288	BDY	REMOVE/REPLACE	FRT AMBIENT TEMP SENSOR	22857635	GM PART	12.48	INC #
12	000026	BDY	REMOVE/REPLACE	FRT BUMPER RIVET 4@0.70	22838717	GM PART	2.80	INC
13	000024	BDY	REMOVE/REPLACE	FRT BUMPER LICENSE BRACKET	10379556	GM PART	9.45	INC
14	000028	BDY	REMOVE/REPLACE	L OTR UPR GRILLE	15221711	GM PART	36.21	INC #
15	000030	BDY	REMOVE/REPLACE	L INR UPR GRILLE	22894328	GM PART	32.87	INC #
16	002468	BDY	REMOVE/REPLACE	L LWR GRILLE	15243286	GM PART	57.09	INC #
17	000014	BDY	REMOVE/REPLACE	L FRONT COMBINATION LAMP ASSEMBLY	15891857	GM PART	248.65	INC
18	AUTO	BDY	CHECK/ADJUST	HEADLAMPS				0.4
19	000037	BDY	REMOVE/REPLACE	FRONT COMBINATION LAMP WIRING HARNESS	15252561	GM PART	125.33	
20	000051	BDY	REMOVE/REPLACE	L FRT FOG LAMP ASSEMBLY	15162975	GM PART	157.10	INC #
21	000058	BDY	REMOVE/REPLACE	HOOD PANEL	15801208	GM PART	384.12	1.0
22	AUTO	REF	REFINISH	HOOD OUTSIDE				C 2.5
23	AUTO	REF	REFINISH	HOOD UNDERSIDE				C 1.3
24	000059	BDY	REMOVE/REPLACE	HOOD INSULATOR	25809556	GM PART	43.95	INC
25	000060	BDY	REMOVE/REPLACE	HOOD INSULATOR RETAINER 4@1.69	22738305	GM PART	6.76	
26	000061	BDY	REMOVE/REPLACE	R INR HOOD HINGE	15143682	GM PART	17.79	0.2 #
27	AUTO	REF	REFINISH	R INR HINGE				C 0.5
28	000062	BDY	REMOVE/REPLACE	L INR HOOD HINGE	15143683	GM PART	17.62	0.2 #
29	AUTO	REF	REFINISH	L INR HINGE				C 0.5
30	000063	BDY	REMOVE/REPLACE	R OTR HOOD HINGE	22701366	GM PART	19.47	INC #
31	AUTO	REF	REFINISH	R OTR HINGE				C 0.5

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12894

Mitchell Data Version: MAY_08_A
UltraMate Version: 6.0.029

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DAC JUN 25 2008

Date: 6/13/2008 06:48 AM
Estimate ID: 12634
Estimate Version: 0
Preliminary
Prepared By: Michael

32	000064	BDY	REMOVE/REPLACE	L QTR HOOD HINGE					
33	AUTO	REF	REFINISH	L QTR HINGE					
34	002494	BDY	REMOVE/REPLACE	FRT HOOD RETAINER 4@2.34					
35	000079	BDY	REMOVE/REPLACE	HOOD LATCH					
36	000091	BDY	REMOVE/REPLACE	HOOD RELEASE CABLE					
37	000082	BDY	REMOVE/REPLACE	COOLING RADIATOR					
38	000088	BDY	REMOVE/REPLACE	L COOLING RADIATOR BAFFLE					
39	000117	MCH	REMOVE/REPLACE	AIR COND CONDENSER -M					
40	AUTO	MCH	REMOVE/REPLACE	EVACUATE & RECHARGE A/C -M					
41	000137	BDY	REPAIR	R FENDER PANEL					
42	AUTO	REF	REFINISH	R FENDER OUTSIDE					
43	000138	BDY	REMOVE/REPLACE	L FENDER PANEL					
44	AUTO	REF	REFINISH	L FENDER OUTSIDE					
45	AUTO	REF	REFINISH	L FENDER EDGE					
46	000146	BDY	REMOVE/REPLACE	L FENDER LINER					
47	003085	BDY	REMOVE/REPLACE	L FENDER WHEELHOUSE PANEL					
48	000163	BDY	REMOVE/REPLACE	UPR FRONT BODY TIE BAR -S					
49	AUTO	REF	REFINISH	UPPER TIE BAR					
50	AUTO	MCH	REMOVE/REPLACE	ADD TO RAR MECHANICAL COMPONENTS -M					
51	AUTO	REF	REFINISH	L APRON/SIDEMEMBER COMPLETE					
52	001067	BDY	REPAIR	L FRONT BODY SIDE RAIL -S					
53	003085	BDY	REMOVE/REPLACE	L ENGINE SHIELD					
54	001084	BDY	REPAIR	R UPR FRONT BODY SIDE RAIL -S					
55	AUTO	REF	REFINISH	R UPR SIDE RAIL					
56	001085	BDY	REMOVE/REPLACE	L UPR FRONT BODY SIDE RAIL -S					
57	001087	BDY	REMOVE/REPLACE	L FRONT BODY BAFFLE -S					
58	003091	BDY	REMOVE/REPLACE	L FRONT BODY WHEELHOUSE ASSY -S					
59	003093	BDY	REMOVE/REPLACE	L PANEL BONDING ADHESIVE					
60	000153	MCH	REMOVE/REPLACE	FUSE BOX -M					
61	001590	MCH	REMOVE/REPLACE	ENGINE WIRING HARNESS -M					
62	001587	MCH	REMOVE/REPLACE	WIRING HARNESS -M					
63	AUTO	MCH	REMOVE/REPLACE	L FRT SUSP COMPONENTS ONE SIDE -M					
64				DOES NOT INCLUDE ALIGNMENT					
65	000338	MCH	ALIGN	FOUR WHEEL -M					
66	000194	MCH	REMOVE/REPLACE	L FRT SUSP HUB & BEARING -M					
67	000256	MCH	REMOVE/REPLACE	L FRT SUSP STRUT ASSY -M					
68	000278	MCH	REMOVE/REPLACE	L LWR FRT SUSP CONTROL ARM ASSY -M					
69	000348	BDY	REMOVE/REPLACE	AIR CLEANER INTAKE DUCT					
70	000368	BDY	REMOVE/REPLACE	BATTERY					
71	002782	BDY	REMOVE/REPLACE	POSITIVE BATTERY CABLE					
72	000390	BDY	REMOVE/REPLACE	NEGATIVE BATTERY CABLE					
73	000391	BDY	REMOVE/REPLACE	BATTERY COVER					
74	000162	BDY	REMOVE/REPLACE	BATTERY TRAY					
75	000392	BDY	REMOVE/REPLACE	RETAINER					
76	000393	BDY	REMOVE/REPLACE	SUPPORT					
77	000394	BDY	REMOVE/REPLACE	DUCT					
78	003854	GLS	REMOVE/REPLACE	W/SHIELD GLASS					
79	900500	GLS	REMOVE/REPLACE	W/S SEAL KIT					
80	001085	BDY	REPAIR	COWL/DASH PLENUM PANEL					
81	000541	BDY	REPAIR	L FRT DOOR REPAIR PANEL					
82	AUTO	REF	REFINISH	L FRT DOOR OUTSIDE					
83	001229	BDY	REMOVE/INSTALL	L FRT REAR VIEW MIRROR					
84	001223	BDY	REMOVE/INSTALL	L FRT QTR BELT MOULDING					
85	001225	BDY	REMOVE/INSTALL	L FRT UPR DOOR GLASS REVEAL MOULDING					
86	001227	BDY	REMOVE/INSTALL	L FRT DOOR REAR APPLIQUE					
87	002485	BDY	REMOVE/REPLACE	L FRT DOOR ADHESIVE NAMEPLATE					
88	001237	BDY	REMOVE/INSTALL	L FRT QTR DOOR HANDLE					
89	936018		ADD'L COST	R134A FREON & OIL					
90	AUTO	REF	ADD'L OPR	CLEAR COAT					
91	AUTO		ADD'L COST	PAINT/MATERIALS					

22701367	GM PART	19.47	INC #	
			C	0.5
11610089	GM PART	11.38		
15876265	GM PART	57.71	INC #	
25817511	GM PART	21.48	0.8	
52484380	GM PART	332.59	INC #	
22705986	GM PART	3.55		
15272890	GM PART	348.47	INC #	
				1.4
Existing				2.0 #
			C	1.5
15292019	GM PART	169.30	1.2 #	
			C	1.5
				0.5
25860275	GM PART	38.32	INC	
25779854	GM PART	17.77	0.8 #	
25800758	GM PART	205.81	5.2 #	
				1.0
				0.6 #
				1.5
Existing				4.0 #
15809317	GM PART	24.78	0.2	
Existing				2.0
				0.5
10375729	GM PART	208.60	INC	
15885556	GM PART	3.51	1.0	
15800731	GM PART	147.90	7.0 #	
12378567	GM PART	78.96		
22731137	GM PART	287.78	1.2 #	
ORDER FROM DEALER		207.67		
ORDER FROM DEALER		1,317.08		
				3.7
				2.7
15793213	GM PART	272.34	INC #	
22715370	GM PART	160.78	INC #	
22730775	GM PART	193.57	INC #	
22884639	GM PART	85.32	INC	
N.A.	GM PART	103.00 *	INC	
88861287	GM PART	29.84	0.6	
88983120	GM PART	48.18	0.4	
22731884	GM PART	40.35		
15217067	GM PART	41.87	INC #	
22593091	GM PART	7.46		
22731258	GM PART	43.68		
22660614	GM PART	8.82		
DW01603QTY		303.75	2.3 #	
New		25.00 *	0.0 *	
Existing			5.0 *	
Existing			2.0 #	
			C	1.5
			INC #	
			INC #	
			INC #	
			1.2 #	
15223484	GM PART	4.75	0.2	
			0.3 #	
		50.00 *		
			3.1	
		627.20 *		

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12634

Mitchell Data Version: MAY_08_A
UltraMate Version: 6.0.029

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DAC JUN 25 2008

Date: 6/13/2008 06:48 AM
Estimate ID: 12994
Estimate Version: 0
Preliminary
Profile ID: Mitchell

92 AUTO ADDL COST HAZARDOUS WASTE DISPOSAL 3.00 *

* - Judgment Item
\# - Labor Note Applies
© - Included in Clear Coat Calc

I. Labor Subtotals:

	Units	Rate	Add'l Labor Amount	Subler Amount	Totals	
Body	35.2	50.00	0.00	0.00	1,760.00	T
Refinish	19.6	50.00	0.00	0.00	980.00	T
Glass	2.3	50.00	0.00	0.00	115.00	T
Mechanical	9.6	60.00	0.00	0.00	576.00	T
Taxable Labor					3,431.00	
Labor Tax		@	7.000%		254.17	
Labor Summary	70.7				3,685.17	

II. Part Replacement Summary

			Amount
Taxable Parts			6,737.24
Sales Tax	@	7.000%	471.61
Total Replacement Parts Amount			7,208.85

III. Additional Costs

			Amount
Taxable Costs			53.00
Sales Tax	@	7.000%	3.71
Non-Taxable Costs			627.20
Total Additional Costs			683.91

IV. Adjustments

	Amount
Insurance Deductible	0.00
Customer Responsibility	0.00

I.	Total Labor:	3,685.17
II.	Total Replacement Parts:	7,208.85
III.	Total Additional Costs:	683.91
	Gross Total:	11,777.93
IV.	Total Adjustments:	0.00
	Net Total:	11,777.93

Total loss - See Salvage sheet.

This is a preliminary estimate.
Additional changes to the estimate may be required for the actual repair.

Inspection Date: 12/30/1999

HILLTOP MOTORS INC. WILL WARRANTY ALL LABOR, WORKMANSHIP, AND REFINISHING FOR UP TO ONE YEAR AFTER REPAIRS ARE COMPLETED.

ESTIMATE RECALL NUMBER: 06/12/2008 15:14:29 12994

Mitchell Data Version: MAY_08_A
UltraMate Version: 5.0.025

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DAC JUN 13 '08

N.A.D.A. Official Used Car Guide
Vehicle Appraisal Retail Value
6/13/2008

2005 PONTIAC
G6-V6
Sedan 4D GT

Region: Eastern June, 2008

VIN: 1G2ZH528954[redacted]

N.A.D.A. Base Clean Retail	$13,475
Mileage (30,000)	$950
Accessories	$1,075
N.A.D.A. Clean Retail Value	**$15,500**

Optional Equipment:

Leather Seats	$400	Power Sunroof	$550
Theft Recovery Sys	$125		
Option Total:	$1,075		

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[redacted]

PLEASE CHECK ONE COMPANY NAME BELOW
☐ Grinnell Mutual Reinsurance Company
☒ Grinnell Select Insurance Company
4215 Highway 146, PO Box 790, Grinnell, Iowa 50112-0790

SALVAGE SHEET

Claim No. PA0002349 6
Insured [redacted]
Loss Date 6/10/08 Coverage Code 200-001

Owner [redacted] Vehicle Color Black Miles 30,000
Location of Auto Insd residence - [redacted] Town Brandon State IA
Year 2005 Make Pontiac Body G6 Series ____ VIN No. 1G2ZH528954 [redacted]
Engine 6 Cylinders/Liters 3.5L Condition ____ Transmission Auto Condition prior salvage
Tire Tread Remaining: RF ____ RR ____ LF ____ LR ____ Spare ____
Air Bag Deployed: ☐ Yes ☒ No If any – give location ____
Glass Broken: Windshield X Back ____ R Vent ____ RF ____ RR ____ L Vent ____ LF ____ LR ____ Back ____

PANEL CODES: X – Usable with Repair; None – None; NG – No Good; OK – Good Parts; PD – Prior Damage (Hrs.)

Top Panel		LF Fender		LR Door		RF Fender		RR Door		Trunk Lid	
Hood		LF Door		LR Quarter		RF Door		RR Quarter			

EQUIPMENT	ADD	DEDUCT
Moon/Sun Roof	550	
Alum/Chrome/Wheel		
AM/FM Ster, Tape/CD		
Power Window		
Power Door Locks		
Power Seat		
Cruise Control		
Tilt Wheel		
R. Window Defogger		
Manual Transmission		
Air Conditioner		
Gas/Diesel Engine		
4 x 4 Pkg.		
Running Boards		
Trailer Tow		
Box Liner		
Anti-Theft/ Alarm	125	
Leather	400	
Subtotal	1075	

EVALUATION OF AUTO

NADA Book Value (base) 15,500.00 Market Survey ____

ADD ON

Low Mileage + 950
Equipment + 1075
Subtotal 2025 + 2025

DEDUCTIONS

High Mileage ____
Equipment ____
Old Damage (minus) – 3875 Prior Salv.
Subtotal 3875 – 3875
NADA Value 11,625

Settlement 11,625
Sales Tax ____
License ____
Subtotal ____
Paper Trans (Salvor Fee) – 2557.50
Ded. (Minus) – 500.00
TOTAL 8567.50

SALVAGE PICK-UP AUTHORIZATION

Stolen ☐
Salvor Retained by owner Control # ____
Date Notified ____ NADA Value 11,625 % 22 Amt. 2557.50
☐ Unit is Released. Forward Salvage Draft. ☐ Negotiable Unit
☐ **HOLD Unit Until Notified.**
Less Towing ____ Storage ____ Total ____
Comments: ____

Permission ☐ IS ☐ IS NOT – hereby granted to the insurance company listed above, or a representative thereof, to move the aforesaid vehicle as necessary.

Market Survey: 1. Dealer ____ Salesman ____
Location ____
Comments ____ Price ____
2. Dealer ____ Salesman ____
Location ____
Comments ____ Price ____

I have received a copy of this form and have had an opportunity to review the form in its entirety.

OWNER'S SIGNATURE ____ DATE 7/11/08 ADJUSTER'S SIGNATURE Anna Miller

ILLINOIS SPECIAL PROVISIONS – The Illinois Vehicle Code states any vehicle 9 (nine) model years of age or older may, by agreement between the registered owner and the insurance company, be retained by the registered owner of such vehicle.

"A person who knowingly and with intent to defraud an insurer files a statement of claim containing any false, incomplete, or misleading information or helps to commit a fraud against an insurer commits a crime."

2917 10-02

GRINNELL SELECT INSURANCE COMPANY

CHECK NUMBER [redacted]

DATE JULY 13, 2008

INSURED: [redacted]				CHECK TOTAL:	$****7,312.78
CLAIM NO:	ACCIDENT DATE:	ADJ:	TAXPAYER ID#:		
PA00023496	06102008	AMI			

FOR: Loan Payoff for Loan # 4278410 for [redacted] for the 2005 Pontiac G6.

TO: ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

GROSS: $****7,312.78
WITHHELD: $*********.00
NET: $****7,312.78

Points being Assessed

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

33-64/730 Bankers Trust Company, N.A.
Des Moines, IA

3001118444

CLAIM NO: PA00023496
TAX ID#:

DATE JULY 13, 2008

Pay $7,312.78 (DOLLAR SEVEN COMMA THREE ONE TWO DOLLARS SEVENTY-EIGHT CENTS)

$****7,312.78

FOR: Loan Payoff for Loan # 4278410 for [redacted] the 2005 Pontiac G6.

TO THE ORDER OF ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

HOME OFFICE COPY

VOID OVER $7,312.78

[redacted]

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790
CLM#: PA00023496 ADJ: AMI

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

Rec'd 7-14-08

ROWLEY SAVINGS BANK
114 ELY ST
ROWLEY IA 52329

GRINNELL SELECT INSURANCE COMPANY

CHECK NUMBER [redacted]

DATE JULY 13, 2008

INSURED: [redacted]

CHECK TOTAL: $****1,254.72

CLAIM NO.:	ACCIDENT DATE:	ADJ	TAXPAYER ID#
PA00023496	06102008	AMI	

FOR: Payment for Total Loss to Your 2005 Pontiac G6 less salvage and $500 deductible.

TO: [redacted]

BRANDON IA [redacted]

GROSS: $****1,254.72

WITHHELD: $*********.00

NET: $****1,254.72

Void after 90 days

GRINNELL MUTUAL REINSURANCE COMPANY

4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

33-64/750 Bankers Trust Company, N.A.
Des Moines, IA

3001118445

CLAIM NO: PA00023496
TAX ID#:

DATE JULY 13, 2008

Pay $1,254.72

$****1,254.72

FOR Payment for Total Loss to Your 2005 Pontiac G6 less salvage and $500 deductible.

TO THE ORDER OF [redacted]

BRANDON IA [redacted]

HOME OFFICE COPY

VOID OVER $1,254.72

[redacted]

GRINNELL MUTUAL REINSURANCE COMPANY

4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

CLM#: PA00023496 ADJ: AMI

[redacted]

BRANDON IA [redacted]

Pd 7-14-08

Total paid for dmg to 2005 Pontiac G6:

Loan payoff – $7312.78
To owner – $1254.72
$8567.50
Deductible + 500.00
Storage + 300.00
$9367.50

GRINNELL SELECT INSURANCE COMPANY

CHECK NUMBER [redacted]

DATE JULY 13, 2008

INSURED:	[redacted]			CHECK TOTAL:	$******300.00
CLAIM NO.	ACCIDENT DATE	ADJ.	TAXPAYER ID#		
PA00023496	06102008	AMI	42-1377761		

FOR: Payment for 30 Days of Storage for the 2005 Pontiac G6.

TO: [redacted]

BRANDON IA [redacted]

GROSS: $******300.00
WITHHELD: $*********.00
NET: $******300.00

Printed using Accumed

GRINNELL MUTUAL REINSURANCE COMPANY

4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

33-64/730 Bankers Trust Company, N.A.
Des Moines, IA

3001118446

CLAIM NO: PA00023496
TAX ID#:

DATE JULY 13, 2008

Pay ➡➡➡➡➡➡➡➡➡➡➡➡➡ $300.00 (DOLLAR THREE ZERO ZERO AND ZERO ZERO CENTS)

$******300.00

FOR Payment for 30 Days of Storage for the 2005 Pontiac G6.

TO THE ORDER OF [redacted]

BRANDON IA [redacted]

HOME OFFICE COPY

VOID OVER $300.00

[redacted]

GRINNELL MUTUAL REINSURANCE COMPANY

4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

CLM#: PA00023496 ADJ: AMI

Pas 7-14-08

[redacted]

BRANDON IA [redacted]

Pol.: 9400057480
PA 23496

Date: 6/12/2008 03:28 PM
Estimate ID: 12693
Estimate Version: 0
Preliminary
Profile ID: Mitchell

HILLTOP MOTORS, INC.

512 20th AVE. S.W., INDEPENDENCE, IA 50644
(319) 334-2337
Fax: (319) 334-3985

Damage Assessed By: ALLEN MAGSAMEN

Deductible: 0.00
Claim Number: PA23496

Insured: [redacted]
Address: [redacted] INDEPENDENCE, IA [redacted]
Telephone: Home Phone: [redacted]

Mitchell Service: 513435

Description: 2002 Chevrolet Pickup Silverado K1500 LS
Body Style: 4D PkupXCb 6" Bed 143" WB
VIN: 1GCEK19T72[redacted]
Drive Train: 5.3L Inj 8 Cyl 4WD
Options: 4WD OR AWD, AIR CONDITIONING, POWER DOOR LOCKS, CRUISE CONTROL, AUTOMATIC TRANSMISSION

Line Item	Entry Number	Labor Type	Operation	Line Item Description	Part Type/ Part Number	Dollar Amount	Labor Units
1	AUTO	BDY	OVERHAUL	FRT BUMPER COVER ASSY			1.3 #
2	500014	BDY	REMOVE/REPLACE	FRT BUMPER FACE BAR	** QUAL REPL PART	345.00 *	INC #
3	505865	BDY	REMOVE/REPLACE	R FRT INR BUMPER BRACE	88944246 GM PART	33.06	INC
4	505868	BDY	REMOVE/REPLACE	L FRT INR BUMPER BRACE	88944245 GM PART	33.06	INC
5	505867	BDY	REMOVE/REPLACE	FRT OTR BUMPER BRACE	88944247 GM PART	400.08	INC
6	500021	BDY	REMOVE/REPLACE	FRT UPR BUMPER COVER	15050703 GM PART	121.86	INC #
7	501703	BDY	REMOVE/REPLACE	FRT BUMPER AIR DEFLECTOR	ORDER FROM DEALER	111.65	INC
8	500042	BDY	REMOVE/REPLACE	R FRT BUMPER BRACE	15705658 GM PART	29.72	0.2 #
9	500043	BDY	REMOVE/REPLACE	L FRT BUMPER BRACE	15705657 GM PART	29.72	0.2 #
10	501706	BDY	REMOVE/REPLACE	R FRT BUMPER FILLER	15035438 GM PART	16.61	0.2 #
11	501707	BDY	REMOVE/REPLACE	L FRT BUMPER FILLER	15035437 GM PART	16.61	0.2 #
12	500031	BDY	REMOVE/REPLACE	GRILLE	** QUAL REPL PART	247.00 *	0.2 #
13	500053	BDY	REMOVE/REPLACE	GRILLE EMBLEM	12335833 GM PART	28.48	INC #
14	500088	BDY	REMOVE/REPLACE	L HLAMP MOUNTING PLATE	15738919 GM PART	22.38	0.2 #
15	AUTO	BDY	CHECK/ADJUST	HEADLAMPS			0.4
16	500094	BDY	REMOVE/REPLACE	L FRT COMBINATION LAMP ASSEMBLY	** QUAL REPL PART	65.00 *	INC #
17	502216	BDY	REMOVE/REPLACE	COOLING RADIATOR SUPPORT	Qual Recycled Part	250.00 *	6.3 #
18				LINE MARKUP $25.00		62.50	
19	500242	MCH	REMOVE/REPLACE	AIR COND CONDENSER -M	** QUAL REPL PART	173.00 *	INC
20	AUTO	MCH	REMOVE/REPLACE	EVACUATE & RECHARGE A/C -M			1.4
21	500296	BDY	REMOVE/REPLACE	L FENDER PANEL	** QUAL REPL PART	183.00 *	1.9 #
22	AUTO	REF	REFINISH	L FENDER OUTSIDE		C	2.0
23	AUTO	REF	REFINISH	L FENDER EDGE		C	1.2
24	502294	BDY	REMOVE/REPLACE	L FENDER LINER	** QUAL REPL PART	28.00 *	0.3
25	507840	BDY	REMOVE/REPLACE	FRAME SIDE PLATE	ORDER FROM DEALER	122.94	0.4
26	500508	MCH	ALIGN	FRONT SUSPENSION -M			2.1
27	502809	BDY	REMOVE/REPLACE	W/SHIELD WASHER RESERVOIR	12487670 GM PART	34.70	0.5
28	501258	REF	REFINISH	L FRT DOOR OUTSIDE		C	2.2
29	504892	BDY	REMOVE/INSTALL	L FRT OTR BELT MOULDING			0.2 #
30	501295	BDY	REMOVE/INSTALL	L FRT REAR VIEW MIRROR			0.2

ESTIMATE RECALL NUMBER: 06/12/2008 15:28:31 12693

Mitchell Data Version: MAY_08_A
UltraMate Version: 6.0.029

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Date: 04/12/2008 03:28 PM
Estimate ID: 12693
Estimate Version: 0
Preliminary
Profile ID: Mitchell

31	504041	BDY	REMOVE/INSTALL	L FRT DOOR ADHESIVE MOULDING				0.4*
32	501288	BDY	REMOVE/REPLACE	L FRT DOOR ADHESIVE NAMEPLATE	Existing 15707431	GM PART	28.40	0.2
33	502181	BDY	REMOVE/INSTALL	L FRT DOOR HANDLE				0.7 #
34	935018		ADD'L COST	R134A FREON & OIL			55.00*	
35	AUTO	REF	ADD'L OPR	TWO TONE				1.7
36	AUTO	REF	ADD'L OPR	CLEAR COAT				1.7
37	AUTO		ADD'L COST	PAINT/MATERIALS			281.60*	
38	AUTO		ADD'L COST	HAZARDOUS WASTE DISPOSAL			3.00*	

* - Judgment Item
# - Labor Note Applies
d - Discontinued by the Manufacturer
C - Included in Two Tone / Clear Coat Calc

Remarks:
POSSIBLE FRAME TIME NEEDED.

I. Labor Subtotals:

	Units	Rate	Add'l Labor Amount	Sublet Amount	Totals	
Body	14.0	50.00	0.00	0.00	700.00	T
Refinish	8.8	50.00	0.00	0.00	440.00	T
Mechanical	3.5	60.00	0.00	0.00	210.00	T
Taxable Labor					1,350.00	
Labor Tax			@ 7.000%		94.50	
Labor Summary	26.3				1,444.50	

II. Part Replacement Summary

		Amount
Taxable Parts		1,941.05
Parts Adjustments		62.50
Sales Tax	@ 7.000%	141.65
Total Replacement Parts Amount		2,185.20

III. Additional Costs:

		Amount
Taxable Costs		58.00
Sales Tax	@ 7.000%	4.06
Non-Taxable Costs		281.60
Total Additional Costs:		343.66

IV. Adjustments

	Amount
Insurance Deductible	0.00
Customer Responsibility	0.00

I.	Total Labor:	1,444.50
II.	Total Replacement Parts:	2,185.20
III.	Total Additional Costs:	343.66
	Gross Total:	3,973.36
IV.	Total Adjustments:	0.00
	Net Total:	3,973.36

This is a preliminary estimate.
Additional changes to the estimate may be required for the actual repair.

Inspection Date: 12/30/1999

HILLTOP MOTORS INC. WILL WARRANTY ALL LABOR, WORKMANSHIP, AND REFINISHING FOR UP TO ONE YEAR AFTER REPAIRS ARE COMPLETED.

ESTIMATE RECALL NUMBER: 04/12/2008 15:28:37 12693

Mitchell Data Version: MAY_08_A
UltraMate Version: 5.0.029

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GRINNELL SELECT INSURANCE COMPANY

CHECK NUMBER [redacted]

DATE JUNE 16, 2008

INSURED: [redacted]				CHECK TOTAL	$****3,953.36
CLAIM NO.	ACCIDENT DATE	ADJ	TAXPAYER ID#		
PA00023496	06102008	AMI			

FOR: Full Settlement of Property Damage Claim Occurring on 6/10/08

TO: [redacted]
ROWLEY IA [redacted]

GROSS: $****3,953.36
WITHHELD: $*********.00
NET: $****3,953.36

Printed using Amerisend

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

33-64/730 Bankers Trust Company, N.A. Des Moines, IA

3001116749

CLAIM NO: PA00023496
TAX ID#:

DATE JUNE 16, 2008

Pay ➡➡➡➡➡➡➡➡➡➡➡ $3,953.36 DOLLAR THREE COMMA NINE NINE THREE PERIOD THREE SIX CENTS

$****3,953.36

FOR Full Settlement of Property Damage Claim Occurring on 6/10/08.

TO THE ORDER OF [redacted]
ROWLEY IA [redacted]

HOME OFFICE COPY

VOID OVER $3,953.36

[redacted]

GRINNELL MUTUAL REINSURANCE COMPANY
4215 Highway 146, PO Box 790
Grinnell, Iowa 50112-0790
CLM#: PA00023496 ADJ: AMI

Grinnell Mutual Reinsurance Company
Grinnell Select Insurance Company
Grinnell InfoSystems, Inc.
Grinnell Advisory Company
Grinnell Realty Company
Big M Agency, Inc.

6-16-08 cmy

[redacted]
ROWLEY IA [redacted]

Total paid for Dmg to Other Vehicle:
$ 3953.36

MARS
May 2003

MAIL REPORTS TO:
Iowa Department of Transportation
Office of Driver Services
P.O. Box 9204
Des Moines, Iowa 50306-9204

Iowa Department of Transportation
INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

Law Enforcement Case Number: 08006900

Legal Intervention? ☐ Private Property? ☐

LOCATION

Date of Accident	Time of Accident	County	Accident occurred within corporate limits of (city)
06/10/08	20:09 Hrs.	Buchanan - 10	

If accident occurred outside of city limits show general vicinity: "N/A" of nearest city "N/A"

On Road, Street, or Highway: "N/A"

At Intersection with: "N/A"

Note: Unless accident occurred at an intersection which is completely described above, use the space below to give the exact location from a milepost or definable intersection, bridge, or railroad crossing, using two distances and directions if necessary.

Distance	Direction		Distance	Direction	
"N/A"	"N/A"	and	"N/A"	"N/A"	of

Milepost Number: "N/A" Or Definable intersection, bridge, or railroad crossing: "N/A"

Location Lateral Description: V071 / DUGAN AVE and D022 / 220TH ST

X-Coordinate: 00581614
Y-Coordinate: 04702208

If Divided Highway, Provide Route (Cardinal) Travel Direction: "N/A"

UNIT 001

Driver's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Phone: [redacted]
Address: [redacted] City: BRANDON State: IA Zip: [redacted]

Date of Birth	Driver's License Number	Citation Charge Code 1	Citation Charge 1
[redacted]	[redacted]	Citation Charge Code 2	Citation Charge 2
Citation Charge Code 3	Citation Charge 3		
Citation Charge Code 4	Citation Charge 4		

Gender	State	Class	Endorsements	Restrictions
Female	IA	C	NONE	BY

Alcohol Test Given?	Test Results:	Drug Test Given?	Test Results:
1 - None		1 - None	

Seating Position 01 | Injury Status 4 | Occupant Protection 2 | Airbag Deployment 5 | Airbag Switch Status 3 | Ejection 1 | Ejection Path 1 | Trapped 1

Transported to: Transported by:

Owner's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Owner Company Name:
Address: [redacted] City: BRANDON State: IA Zip: [redacted]

Insurance Co. Name: GRINNELL MUTUAL Insurance Policy #: [redacted] License Plate #: [redacted] State: IA Year: 2009

VIN No.	Year	Make	Model	Style	Tow #	Approximate Cost to Repair or Replace
1G2ZH528954[redacted]	2005	Pontiac - PONT	G6	4D	NO	$5,500.00

Private? ☒

Initial Travel Direction	Vehicle Action	Speed Limit	Point of Initial Impact	Most Damaged Area	Extent of Damage	Underride/ Override
3	03	55	02	02	4	1

Total Occupants	Traffic Controls	Vehicle Config.	Cargo Body Type	Vehicle Defect	Driver Condition	Vision Obscured	Contributing Circumstances, Driver (up to two)
01	01	01	01	99	1	01	07

SEQUENCE OF EVENTS: First Event 21 | Second Event | Third Event | Fourth Event | Most Harmful Event (by vehicle) 21

Commercial Trailer License Plate #: Attached to Power Unit: State Year Attached to Trailer Unit: State Year Emergency Vehicle Type 1 Emergency Status 3

Carrier Name: Address: City: State: Zip:

US DOT #: or MC #: Number of Axles: Gross Vehicle Weight Rating: Placard #: Hazardous Materials Released?

UNIT 002

Driver's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Phone: [redacted]
Address: [redacted] City: NEW VIRGINIA State: IA Zip: [redacted]

Date of Birth	Driver's License Number	Citation Charge Code 1	Citation Charge 1
[redacted]	[redacted]	Citation Charge Code 2	Citation Charge 2
Citation Charge Code 3	Citation Charge 3		
Citation Charge Code 4	Citation Charge 4		

Gender	State	Class	Endorsements	Restrictions
Male	IA	B	NONE	NONE

Alcohol Test Given?	Test Results:	Drug Test Given?	Test Results:
1 - None		1 - None	

Seating Position 01 | Injury Status 5 | Occupant Protection 2 | Airbag Deployment 5 | Airbag Switch Status 1 | Ejection 1 | Ejection Path 1 | Trapped 1

Transported to: Transported by:

Owner's Name - Last: [redacted] First: [redacted] Middle: [redacted] Suffix: Owner Company Name:
Address: [redacted] City: ROWLEY State: IA Zip: [redacted]

Insurance Co. Name: PROGRESSIVE CASUALTY Insurance Policy #: [redacted] License Plate #: [redacted] State: IA Year: 2009

VIN No.	Year	Make	Model	Style	Tow #	Approximate Cost to Repair or Replace
1GCEK19T72Z[redacted]	2002	Chevrolet - CHEV	SLV	PK	NO	$3,500.00

Private? ☐

Initial Travel Direction	Vehicle Action	Speed Limit	Point of Initial Impact	Most Damaged Area	Extent of Damage	Underride/ Override
1	10	55	02	02	2	1

Total Occupants	Traffic Controls	Vehicle Config.	Cargo Body Type	Vehicle Defect	Driver Condition	Vision Obscured	Contributing Circumstances, Driver (up to two)
01	01	02	01	01	1	01	28

SEQUENCE OF EVENTS: First Event 21 | Second Event | Third Event | Fourth Event | Most Harmful Event (by vehicle) 21

Commercial Trailer License Plate #: Attached to Power Unit: State Year Attached to Trailer Unit: State Year Emergency Vehicle Type 1 Emergency Status 3

Carrier Name: Address: City: State: Zip:

US DOT #: or MC #: Number of Axles: Gross Vehicle Weight Rating: Placard #: Hazardous Materials Released?

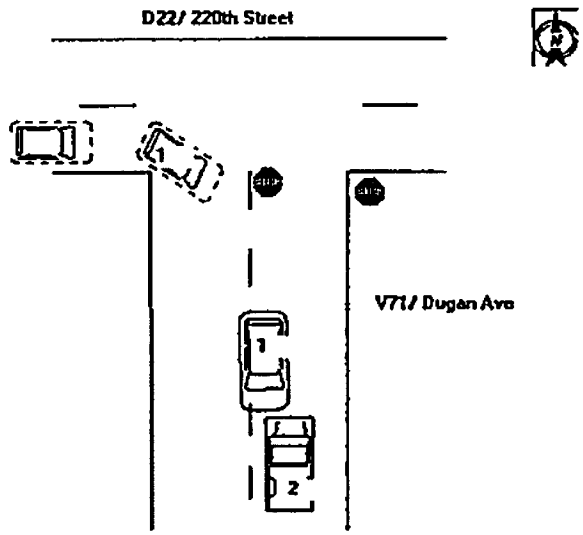
If Property other than vehicles damaged explain	Object Damaged	Estimate of Damage	Was owner or tenant notified?
	NONE		

Owner's Name - Last	First	Middle	Suffix	Company Owner Name

Street or RFD	City	State	Zip Code

ACCIDENT ENVIRONMENT				ROADWAY CHARACTERISTICS Major Contributing Circumstances:		WORKZONE RELATED?	SEQUENCE OF EVENTS
Location of First Harmful Event	1	Weather Conditions (up to two)	02	Environment	1	No	First Harmful Event of Crash (use codes 11-42 only) 21
Manner of Crash/Collision	2			Roadway	01	Location	
Light Conditions	1	Surface Conditions	1	Type of Roadway Junction/Feature	12	Type	
						Workers Present?	

DIAGRAM



NARRATIVE

Describe what happened (refer to vehicles by number)

UNIT 1 WAS TRAVELING EAST BOUND ON D22 AND ATTEMPTING TO MAKE A RIGHT TURN ONTO V71. AFTER MAKING THE RIGHT TURN UNIT 1 CROSSED THE CENTER LINE AND WENT INTO THE PATH OF UNIT 2. UNIT 1 THEN STRUCK UNIT 2 IN A HEAD ON COLLISION CAUSING DAMAGE TO BOTH VEHICLES. NO INJURIES WERE REPORTED AT THE TIME OF THE ACCIDENT.

WITNESS	Witness Name - Last	First	Middle	Suffix
	[redacted]	[redacted]		

Address	City	State	Zip Code
[redacted]	JESUP	IA	

Home Phone #	Work Phone #
[redacted]	

Officer	Badge No	Time Officer Notified of Accident	Time Officer Arrived At Scene
Schwinghammer Joe	S6039	20:09 Hrs.	20:21 Hrs.

Name of Agency	Date of Report	Investigation made at scene?	T.I. #
Buchanan Cnty Sheriff's Office	06/10/2008	Yes	

Report Reviewed By:	Date Reviewed	Agency Specific	Other Technical Investigation Agency
			Buchanan Cnty Sheriff's Office

CARFAX

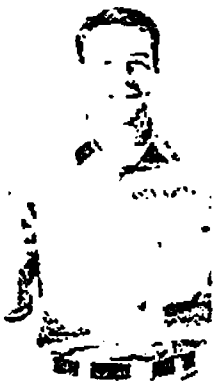
2005 PONTIAC G6 GT
1G2ZH528954[redacted]
SEDAN 4 DR 3.5L V6 SFI
FRONT WHEEL DRIVE

CARFAX 1-Owner vehicle

Search for other in Lease vehicle
Minneapolis, MN

8 Detailed records available

18,172 Last reported odometer reading



SUMMARY

A CARFAX Vehicle History Report is based only on supplied to CARFAX. Other information about this vehicle, including problems, may not have been reported to CARFAX. Use this report as one important tool, along with a vehicle inspection and test drive, to make a better decision about your next used car.

OWNERSHIP HISTORY

	OWNER 1
Year purchased	2004
Type of owner	Lease
Estimated length of ownership	1 yr. 4 mo.
Owned in the following states/provinces	Iowa
Estimated miles driven per year	—
Last reported odometer reading	18,172

TITLE PROBLEMS

	OWNER 1
	No Problem
	No Problem

Severe problems were reported by a state Department of Motor Vehicles (DMV). This vehicle does not qualify for the CARFAX Buyback Guarantee.

OTHER INFORMATION

	OWNER 1
Total loss reported on 03/16/2006.	
No structural / frame damage reported to CARFAX.	No Issues Reported
No airbag deployment reported to CARFAX.	No Issues Reported
No indication of an odometer rollback.	No Issues Indicated
See State DMV-reported Title Problems above.	
Check with an authorized Pontiac dealer for any open recalls.	No Recalls Reported
Original manufacturer warranty likely voided by manufacturer after vehicle was severely damaged.	Warranty Voided

Still looking? Find similar cars just listed for sale in your area.

Body Style: Sedan 4 DR
Engine Type: 3.5L V6 SFI
Standard Equipment: Power Windows, Power Steering, Air Conditioning, AM / FM CD, Power Brakes, Tilt Wheel, 6-digit Odometer
CARFAX

763-561-8111

Distance: 7.94 mi

GM Certified Used Vehicle
Body Style: Sedan 4 DR
Engine Type: 3.5L V6 SFI

Distance: 36.27 mi

Body Style: Sedan 4 DR
Engine Type: 3.5L V6 SFI

CARFAX 1 OWNER

Distance: 7.94 mi

CARFAX ASSURANCE YOU WON'T SPEND HUNDREDS ON REPAIRS.

DETAILS

A CARFAX Vehicle History Report is based only on information supplied to CARFAX. CARFAX checked over 5 billion vehicle history events and found 8 record(s) for this 2005 PONTIAC G6 GT (1G2ZH528954[redacted]

OWNER 1

Date:	Mileage:	Source:	Comments:	
11/12/2004	49	Iowa Motor Vehicle Dept. West Des Moines, IA Title #77Y733239	Title issued or updated First owner reported Registered as lease vehicle Loan or lien reported	
03/16/2006		Iowa Motor Vehicle Dept.	Title or registration issued to insurance company	TOTAL LOSS VEHICLE
03/16/2006	18,172	Iowa Motor Vehicle Dept. Davenport, IA Title #82SA20182	Vehicle color noted as Black	SALVAGE TITLE ISSUED
04/10/2006		Iowa Motor Vehicle Dept. Cedar Rapids, IA Title #57SA01989	Vehicle color noted as Black Owner purchased from leasing company	SALVAGE TITLE ISSUED
04/28/2006		Iowa Motor Vehicle Dept. Brandon, IA Title #10SA00709	Vehicle color noted as Black	SALVAGE TITLE ISSUED
08/23/2007		Iowa Motor Vehicle Dept. Brandon, IA Title #10AA21691	Loan or lien reported Vehicle color noted as Black	RE-BUILT TITLE ISSUED
10/26/2007		Iowa Motor Vehicle Dept. Brandon, IA Title #10AA21691	Correction to record Loan or lien reported Vehicle color noted as Black	RE-BUILT TITLE ISSUED
04/30/2008		Iowa Motor Vehicle Dept. Brandon, IA Title #10AA21691	Loan or lien reported Vehicle color noted as Black	RE-BUILT - TITLE ISSUED

If you are buying this vehicle from a private seller, check to be sure any associated on the vehicle has been paid off.

[redacted]

Have Questions? Please visit our Help Center at

GLOSSARY

- **Accident / Damage Indicator**
  CARFAX receives information about accidents in all 50 states, the District of Columbia and Canada. Different information in a vehicle's history can indicate an accident or damage, such as: salvage auction, fire damage, police-reported accident, crash test vehicle, damage disclosure, collision repair facility and automotive recycler records. Not every accident or damage event is reported and not all reported are provided to CARFAX. Details about the accident or damage event when reported to CARFAX (e.g. severity, impact location, airbag deployment) are included on the Vehicle History Report. CARFAX recommends you obtain a vehicle inspection from your dealer or an independent mechanic.
  - According to the National Safety Council, Injury Facts, 2007 edition, 7% of the 245 million registered vehicles in the U.S. were involved in an accident in 2005. Over 75% of these were considered minor or moderate.
  - CARFAX depends on many sources for its accident / damage data. CARFAX can only report what is in our database on 08.Jan.2009 18:53:50. New data will result in a change to this report.
- **First Owner**
  When the first owner(s) obtains a title from a Department of Motor Vehicles as proof of ownership.
- **Lease**
  When someone leases a car from a dealer, the dealer actually sells the vehicle to a leasing company. The leasing company then collects payments for the vehicle from the new owner for 24, 36, 48 or more months. A leasing company can be an independent car dealer or a car manufacturer.
- **Ownership History**
  CARFAX defines an owner as an individual or business that possesses and uses a vehicle. Not all title transactions represent changes in ownership. To provide estimated number of owners, CARFAX proprietary technology analyzes all the events in a vehicle history. Estimated ownership is available for vehicles manufactured after 1994 and titled solely in the US including Puerto Rico. Dealers sometimes opt to take ownership of a vehicle and are required to in the following states: Maine, Massachusetts, New Jersey, Ohio, Oklahoma, Pennsylvania and South Dakota. Please consider this as you review a vehicle's estimated ownership history.
- **Rebuilt/Reconstructed Title**
  A Rebuilt/Reconstructed vehicle is a salvage vehicle that has been repaired and restored to operation. These vehicles are often severely damaged before they are rebuilt and refurbished parts are typically used during reconstruction. In most states, an inspection of the vehicle is required before the vehicle is allowed to return to the road.
- **Salvage Title**
  A Salvage Title is issued on a vehicle damaged to the extent that the cost of repairing the vehicle exceeds ~ 75% of its pre-damage value. This damage threshold may vary by state. Some states treat Junk titles the same as Salvage but the majority use this title to indicate that a vehicle is not road worthy and cannot be titled again in that state. The following eleven states also use Salvage titles to identify stolen vehicles - AZ, FL, GA, IL, MD, MN, NJ, NM, NY, OK and OR.
- **Title Issued**
  A state issues a title to provide a vehicle owner with proof of ownership. Each title has a unique number. Each title or registration record on a CARFAX report does not necessarily indicate a change in ownership. In Canada, a registration and bill of sale are used as proof of ownership.
- **Total Loss Vehicle**
  An insurance or fleet company declares a vehicle a total loss when a claim exceeds ~ 75% of its pre-damage value or if the vehicle is stolen and not recovered. This damage threshold varies by company. These companies typically take possession and obtain the title. Not all total loss vehicles result in a DMV-reported branded title. This may occur when an insurance company's definition of a total loss is different than the state DMV's definition for a branded title or when the owner of the vehicle is a self-insured company, like a fleet or rental company.

ZIP code where you park at night: [ ] WEB

Additional Services & Resources

[illegible]

RESPONSIBILITY IS ASSUMED BY CARFAX OR ITS AGENTS FOR ERRORS OR OMISSIONS IN THIS REPORT. CARFAX [illegible]

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[redacted]

CARFAX

The original manufacturer warranty for this 2005 PONTIAC GRAND PRIX GT (1G2ZH528954129450) may have been void when this vehicle was severely damaged.

VIN:	1G2ZH528954[redacted]
Estimated start date of warranty:	11/12/2004
Last CARFAX reading reported on 03/16/2006:	18,172 miles
Today's Date:	January 8, 2009

Basic	36 months or 36,000 miles	Void
Drivetrain	36 months or 36,000 miles	Void
Emissions	No data reported to CARFAX	Void
Corrosion	72 months or 100,000 miles	Void
Transferable	No data reported to CARFAX	Void
Roadside Assistance	No data reported to CARFAX	Void
Safety belt & inflatable restraint	No data reported to CARFAX	Void
Specific Components	96 months or 80,000 miles	Void

Notes

Transferable, no cost, unlimited owners covered. Alignment and wheel balancing are [illegible] adjustments, alternate transportation, roadside assistance, and tires. Includes [illegible]

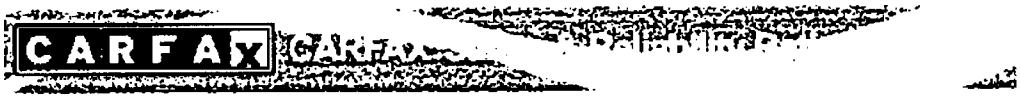
Manufacturer covers emissions components under basic warranty. Emissions [illegible]

Warranty Pros recommends performing a vehicle information report to confirm applicable manufacturer warranty coverage

CARFAX Warranty Check provides an estimate of this vehicle's remaining warranty coverage. It does not take into account some vehicle history events such as some title brands that may void the original manufacturer warranty or ownership transfers that may decrease warranty coverage. This warranty information is only valid for vehicles manufactured for the United States.

Complete warranty coverage information is available for this vehicle at the

[redacted]



report, you'll know the safety and reliability of your next used car. All information presented in this report is specific to the 2005 PONTIAC G6 GT. Please view the for the detailed history of a specific used PONTIAC

This information will help you select a vehicle model that meets your expectations for safety and security.

Use this information to check how reliable a vehicle model is before you buy.

Let us do the work!

Be the first to know about 2005 PONTIAC G6 GT vehicles just listed for sale in your area.

Zip Code

NHTSA Crash Test Results

Driver	○○○○○
Passenger	○○○○○
Front Seat	○○○○○
Rear Seat	
Rollover Resistance	

LEGEND

○○○○○

The National Highway Traffic Safety Administration (NHTSA) provides 3 different ratings , and . The frontal crash test indicates how well the safety features and restraints will protect an occupant in a head on collision. The side impact test measures the chance of a serious chest injury while the rollover resistance rating estimates the risk of rolling over in a single vehicle crash. Go to to learn more about these results.

NHTSA Crash Test Results

Overall Evaluation	G
Structure/Safety Cage	G
Injury Measures	
Head/Neck	G
Chest	G
Leg/foot, left	G
Leg/foot, right	M

LEGEND

G

A

M

P

[redacted]

Crash Tested Vehicle

these results are good indicators of how a frontal and side impact can structurally impact a 2005 PONTIAC G6 GT. The crashworthiness

about these crash test results.

Low-Speed Damage Repair

Front into flat barrier	Not tested by IIHS
Front into angle barrier	Not tested by IIHS
Rear into flat barrier	Not tested by IIHS
Rear into pole	Not tested by IIHS

how well this 2005 PONTIAC G6 GT bumpers will protect the car body from damage in low-speed collisions. Low-speed damage repair costs are obtained from the Insurance Institute for Highway Safety, Highway Loss Data Institute.

Injury, Collision, & Theft Indexes

115	Average
123	Worse than average
87	Average

represent higher risk in each category. For example, an injury indicator score of 122 means that a passenger in this model is 22% Insurance Institute for Highway Safety, Highway Loss Data Institute. about these results.

Safety Recalls

Administration (NHTSA). To find out if a specific 2005 PONTIAC G6 GT still has open recalls that require repair, CARFAX

Recall date:	04-06-2005
Units potentially affected:	35,777
NHTSA campaign number:	05V098000
Defective part or component:	EQUIPMENT:OTHER:OWNERS/SERVICE/OTHER MANUAL
Description:	Certain passenger vehicles fail to conform to the requirements of Federal Motor Vehicle Safety Standard No. 225, Child Restraint Anchorage Systems. The child restraint lower anchors in the center rear seating position are located approximately 90mm behind the corresponding z-point of the child restraint Section [illegible]. The owners manual states that anchors are at the outboard seating positions only. Without additional and corrected owners manual information, an owner may encounter difficulty in installing child restraints with rigid attachments in the center position. Owners will be mailed an owner's manual supplement. The recall is expected to begin on April 4, 2005. Owners may contact Pontiac at 1-800-620-7888.

institute and is derived from the list of safety recalls. Please call the National to obtain information on cars, trucks, child seats, and highway or traffic safety. CARFAX does not review, validate or edit the information and statements provided by the National Highway Traffic and Safety Administration, which do not represent the opinion

[redacted]

of CARFAX

2

J.D. Power Ratings

Power Circle Ratings J.D. Power Consumer Center jdpower.com

Initial Ratings (up to 1 year)

Scoring Legend
- Among the best
- Better than most
- About average
- The rest

Midterm Ratings (1-3 Years)

No data from source

No data from source

No data from source

Long Term Ratings (3-5 Years)

No data from source

No data from source

No data from source

No data from source

J.D. Power and Associates uses selected highlights from the family quality and [illegible] to create the Power Ratings at the model-level. These ratings and awards are based on model rankings within each vehicle segment, whereas Power Circle Ratings compare all models across segments.

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Identifix Reliability Ratings

IDENTI FIND FIXES FASTER

LEGEND
- Normal Problems

Engine	Infrequent problems reported, all with low repair costs
Driveline	Infrequent problems reported, all with low repair costs
Steering & Suspension	Infrequent problems reported, all with low repair costs
Brakes	Infrequent problems reported, all with low repair costs
Heating & Air Conditioning	[illegible]

[redacted]

Starting & Charging	Infrequent problems reported, all with low repair costs
Accessories	Infrequent problems reported, all with low repair costs

This 2005 PONTIAC G6 reliability information was provided by Identifix. Identifix is the nation's largest technical research service for the aftermarket auto repair industry. CARFAX does not review, validate or edit the information and statements provided by Identifix, which do not represent the opinion of CARFAX.

Intellichoice Cost of Ownership & Value Rating

IntelliChoice

Category:	G6 GT:
	$14,334
	$3,045
	$6,362
	$421
	$5,466
	$1,683
	$700
Total 5-Year Ownership Cost	$32,008

Ownership costs are the costs to purchase and operate a vehicle over a period of time. Understanding these costs can save you money and help you make a wiser financial decision when it comes time to select a vehicle. Intellichoice is one of the leading providers of automotive information in the U.S.

Original Manufacturer Warranty

Basic:	3 years or 36,000 miles
Drivetrain:	3 years or 36,000 miles
Emissions:	No data from source
Corrosion:	6 years or 100,000 miles
Transferable:	No data from source
[illegible]	[illegible] transferable.
Safety Belt & Inflatable Restraint:	No data from source
Specific Components:	8 years or 80,000 miles
Notes:	Transferable: no cost, unlimited number covered. Alignment and wheel balancing are considered maintenance after 7,500 miles. Includes surface corrosion, battery adjustments, alternate transportation, roadside assistance, and more. Includes courtesy transportation, roadside assistance, transferable, no deductible. Manufacturer owner maintenance requirements under basic warranty. Emissions coverage may vary by state. Refer to owners manual for specific details. Visit Warranty Pros recommends confirming a vehicle information report to confirm applicable manufacturer warranty coverage.

This 2005 PONTIAC G6 GT warranty information has been provided by JM Warranty Pros.

New Car Test Drive Review

All-new mid-size sedan is roomy and affordable.
By Jim McCraw, NewCarTestDrive.com

The all-new Pontiac G6 is much roomier than the previous Grand Am. It offers good road manners and excellent overall function, especially at these initial prices. It does its job well and should be a big seller for Pontiac in the years to come, especially when the line expands to coupes, convertibles and high-performance versions.

[redacted]

Review

New Car Test Drive correspondent Jim McCraw reports from Norvell, Michigan

[illegible] Pontiac has put a stake in the ground, challenging the Honda Accord, Nissan Altima and Mazda 6 to beat it on sheer value. That was the central [illegible] sixth generation of the Pontiac Grand Am, first introduced in 1992 as a much larger car, and evolving down to the all-new (generation 6, or G6)

Initially, the Pontiac G6 is being introduced as a sporty four-door sedan, available in SE and GT trim levels. Initially, all will be equipped with a 3.5-liter V6. By spring 2005, the G6 fam will include sporty two-door coupes and convertibles, each with unique styling. Three engines will be available: a four-cylinder, a 3.5-liter V6, and a high-performance 3.9-liter V6, the latter in a new GTP model. All come standard with four-speed automatic transmissions, though a high-performance six-speed manual gearbox will be available for the GTP.

We found the G6 has good road manners, more value-driven head benefits of its longer wheelbase and European-designed architecture. The sedan is roomy and plush with excellent overall function and its price point will make it popular choice as a mid-size sedan. The G6 offers some interesting features. The car can be started remotely by pressing a button on the key fob from the comfort of your home, a real bonus on bitter cold winter mornings or sweltering summer afternoons. A panoramic roof is available with sunroof that slide forward, providing a sunroof large enough for the back-seat riders to enjoy an open-air experience.

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Awards

View awards recognized by , , and

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CARFAX

2005 PONTIAC G6
1G2ZH528954[redacted]
Sedan 4 Door
Front Wheel Drive

The CARFAX Vehicle Rating is provided by real CARFAX customers who have owned or shopped for this 2005 PONTIAC G6.

THERE ARE CURRENTLY NO CUSTOMER RATINGS FOR THIS VEHICLE

THERE ARE CURRENTLY NO CUSTOMER COMMENTS FOR THIS VEHICLE

How do you know about this vehicle?

Tell us what you know about this car. Was it well

[redacted]

Own(ed) it

Saw it for sale

Saw it for sale and test drove it

Rate this vehicle's overall condition:

Poor (1) Excellent (5)

Add a current odometer reading in miles:

Example: 12,345

maintained? Has it been damaged? How did it drive?

What you should and should not include in the review.
- Comment on this vehicle only
- Don't include names, e-mails or addresses
- View &
- If you have a question for CARFAX, go to the

1,000 Character Maximum

1000 characters remaining

Submit Comments

CARFAX only displays comments in compliance with the . It does not validate these comments but reserves the right to accept or decline any entry. CARFAX does not inspect vehicles and recommends you have a vehicle inspected by or mechanic before buying. Questions for CARFAX?

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Service Request Detail

SR No.	71-643408896	**Ref No.**		**Goodwill**	No Goodwill Offered	**BRC Type**	PAR
Account		**Site**		**GW SubType**		**Bus. Unit**	BRC
Last Name	[redacted]	**First Name**	[redacted]	**Approval**	Not Initiated	**Area**	PAR
Daytime #	[redacted]	**Evening #**	[redacted]	**UCC**	Steering - General	**Sub-Area**	Initiate PAR- Injury
Address	[redacted]	**City**	Columbus	**Involved Dir**		**Safety**	No
State	OH **ZipCd** [redacted]	**Con Acct**		**Source**	Phone	**Updated**	7/14/2008 10:28:30 AM
Serial #/VIN	1G2ZH528754 [redacted]	**Model Year**	2005	**Priority**	Medium **License #** PONTIAC	**Owner**	MARQUEMO
Make	Pontiac	**Warr. Start**	11/01/2004	**Status**	Open	**Opened**	7/9/2008 09:26:37 AM
Model	G6	**Mileage**	50000	**Sub-Status**	Satisfied	**Closed**	

Abstract Collision - Injuries - Steering - General - Third Party Property Damages

Customer Description ***This is a BRC PAR Case. Please do not assume. Forward any inquiries to Monica Marquez at ext.21072 ***

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Owner	11/19/2007 09:27:10 AM	Y	1	1	Asphalt	Dry	07139204	29644

Driver Last Name	Driver First Name	Height	DOB	Disabilities
[redacted]		5'7"	[redacted]	n/a

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Jatoby	Charles	(614) 249-2141	Nationwide Insurance Company

Incident Loc I71 south Columbus OH

Component loss of power steering control

Vehicle Loc Unknown - Insurance company took veh

Emgcy Svc Names Columbus Police Dept and Fire Dept

Incident Desc Cust sts:Daughter was driving down the ramping down the ramp and her steering locked up and hit guardrail and she turned veh and the semi hit her, it totaled the veh and semi turned into flames and fire and police dept was called.

Damage Desc came down ramp and car did not turn driver hit gardrail and then swerved into on comming semi which turned towards the curb to avoid her but did strik

Add'l Info cust seeks to see if bulitin on steering and if can recover some cost.
cust paid $1000 and driver had broken nose from the airbag. 2005 g6 steering went haywire and

Maint Loc did not have veh long enough to do any related maintence

PAR Detail

Collision	Y	**Non Collision**	**Property Damage**	Y	**Thermal Evt**	N	**Spec Equip**	none	
Vehicle Speed			**Weather Condition**	Dry			**Prop Owner**	Semi Truck	**Property Type** Semi Truck
Last Service Date			**Loc Last Service**				**Property Location**	Unknown	**Prop Est Repair Cost**
Veh Est Repair Cost			**Spec Equip Installer**	none			**Prop Damage Description**	Unknown of damages and insurance company paid for damages	
Primary Veh Use	Personal		**Inspection Type**				**Inspected By**	Inspection Not Performed	**Inspection Date/Time**
Veh Damage Description	Unkown of speed, Front end was damaged and veh was totaled						**Explain Other**	Inspection Not Performed	

Service Request Detail

PAR Injuries

Last Name	First Name	DOB	Location	Phone #	Seating Pos	Restraint Type
			Occupant of Owner's Vehicle		Driver	seatbelts and air bag

Injury Description	Medical Rpt#	Treatment Location	Treated By
airbag broke nose	Unknown	Grant Medical Center trasported by abumblance	ER doctors and then nose surgery the next week

Street Address	City	State	Zip Code
	Columbus	OH	

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/14/2008 10:27:05 AM	MARQUEMO	MARQUEMO	Scheduled Follow-up		Scheduled Alarm		Follow up with ESIS

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/14/2008 10:25:21 AM	MARQUEMO	MARQUEMO	BRC PAR	ESIS- Injuries	Done	7/14/2008 10:27:00 AM	ESIS- Injuries - Third Party Property Damages

Contact Last Name	Contact First Name	Account	BAC Code

Comments

File fowarded to ESIS due to cust sts collision was due to steering which caused injuries to driver of an broken nose, veh did collide into an semi which cust was be held responsible for damages.(Third Party Damages)

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/14/2008 10:24:46 AM	MARQUEMO	ESISBIQU	Escalation	ESIS - Injuries	In Progress		Assign to ESIS

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Injuries - Third Party Property Damages

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 03:20:22 PM	MARQUEMO	MARQUEMO	Scheduled Outbound Call Cust		Done	7/14/2008 09:43:22 AM	Call customer

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Action Plan: Perform Initial Contact with Customer

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 03:18:04 PM	MARQUEMO	MARQUEMO	Outbound Call Customer	Left Message	Done	7/11/2008 03:19:45 PM	Called:(614) 854-8061

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

CRS adv.Message is for Debbie this is Monica Marquez calling from gm par dept. Advised to call CRS back at 1-866-790-5700 ext.21072, Advised CRS is calling in regards to the 05 Pontiac G6.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 11:38:18 AM	MARQUEMO	MARQUEMO	Scheduled Outbound Call Cust		Done	7/11/2008 03:17:29 PM	Call Customer

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Action Plan: Perform Initial Contact with Customer

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 04:23:26 PM	MARQUEMO	MARQUEMO	Scheduled Outbound Call Cust		Done	7/11/2008 11:38:05 AM	Call Customer call before 12:10pm

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Action Plan: Perform Ack with Customer

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 01:22:06 PM	MARQUEMO	MARQUEMO	Ownership Changed	Ownership Escalated to BRC	Done	7/10/2008 01:22:07 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:11:16 PM	DRAHEICM	MARQUEMO	Ownership Changed		Done	7/10/2008 12:11:16 PM	Service Request Ownership has changed FROM: GREENKE TO: MARQUEMO

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:56 PM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact- Phone	Done	7/14/2008 10:18:14 AM	called:(614) 854-8061

Contact Last Name	Contact First Name	Account	BAC Code

Comments

CRS adv: asked detailed questions

Cust sts:Daughter was driving down the ramping down the ramp and her steering locked up and hit guardrail and she turned veh and the semi hit her, it totaled the veh and semi turned into flames and fire and police dept was called. Cust sts it has something to do with the steering that caused the collision, daughter did substain an broken nose and did go to the emergency room, the damages to the veh was the whole front end, veh was totaled by insurance company and frontal airbags did deploy. Cust was being held responsible for the third party damages and insurance did pay out damages. Unknown if the other driver substained injuries. Insurance company now have hold of the vehicle.

Cust Sks: Comp.Pain and suffering and Reimbursement of 500.00 deductable and 150.00 for ER co.pay and 400.00 for EMS transport and 95.00 Ticket

CRS adv:Due to the third party damages and major injuries this file will have to be fowarded to ESIS and will be incontact with cust in 7-10 business days.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:50 PM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact- Dealer	Done	7/14/2008 10:18:56 AM	No Call Needed

Contact Last Name	Contact First Name	Account	BAC Code

Comments

No need to call Dlr. Vehicle beyond warranty and has not been to dealer in two years.

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:45 PM	DRAHEICM	MARQUEMO	BRC PAR	Initial Contact- AVM	Done	7/14/2008 10:23:37 AM	called:Taylor Steven 630092 8192 HAYDOCY AUTOMOTIVE COLUMBUS OH

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

This is Monica Marquez calling from gm par dept.
Customer:[redacted]
Service Request:71-643408896
Vehicle information:2005 Pontiac G6
Last 8 of the VIN: 54[redacted]
Involved Dealership:no dlr involved
Nature of allegation: veh had an collision due to steering failed and driver substained an broken nose , file will be fowarded to ESIS.
CRS adv if you have any additional information pertaining to customer or vehicle please contact me at 1-866-790-5700 ext 21072. If not then this is an FYI to let you know what is going on in your district.

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:40 PM	DRAHEICM	MARQUEMO	BRC PAR	Acknowledgement	Done	7/11/2008 11:38:08 AM	called[redacted]

[redacted]	[redacted]irst Name	Account	BAC Code
[redacted]			

Comments

Left Message

CRS adv: Message is for Debbie Fuchs, this is Monica Marquez calling from gm par dept in regards to the 05 Pontiac G6. Advised to call CRS back at 1-866-790-5700 ext.21072.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:36 PM	DRAHEICM	MARQUEMO	Notify CRM		Done	7/10/2008 04:23:19 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:32 PM	DRAHEICM	MARQUEMO	Research		Done	7/14/2008 10:20:32 AM	research vin

Contact Last Name	Contact First Name	Account	BAC Code

Comments

CRS Performed VIN Scan

GMVIS: Found No Open Recalls

VIN: Found No Duplicate File

SVC History: No Service History Related to Allegation

Monica Marquez/BRCPAR/ATX
X21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 12:10:19 PM	DRAHEICM	MARQUEMO	BRC PAR	Case Assigned	Done	7/10/2008 01:23:56 PM	assigned to monica marquez ext 21072

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 10:52:34 AM	DRAHEICM	GREENKE	SR Opened		Done	7/10/2008 10:52:34 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 10:52:14 AM	DRAHEICM	GREENKE	SR Closed - Satisfied		Done	7/10/2008 10:52:31 AM	Service Request has been Closed Satisfied.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/9/2008 10:11:41 AM	GREENKE	DRAHEICM	Escalation	Initiate PAR	Done	7/10/2008 10:51:54 AM	Assigning activity to PAR QUEUE.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/9/2008 10:00:07 AM	GREENKE	GREENKE	Inbound Call Customer	Complex Request	Done	7/9/2008 10:10:37 AM	re accident involving steering

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

cust seeks to see if bulitin on steering and if can recover some cost.
cust paid $1000 and driver had broken nose from the airbag. 2005 g6 steering went haywire and she got into an accident have heard that there was a letter sent about the steering on the g6.
cust has purchased a 07 g6 to replace orig veh
came down ramp and car did not turn driver hit gardrail and then swerved into on comming semi which turned towards the curb to avoid her but did strike her.
right side damaged from guard rail and semi struck on front left side which crumpled the front end.
crs stated we do have Special Coverage 07126 Customer Letter Loss of power steering assist
submitted pre par file
10:10
Tier 1
CAC/STJ Kevin Green

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M01	Excessive Effort	Steering - General

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZH528754[redacted]

VEHICLE INFORMATION

Merchandising Model :	2ZH69 -2005 G6 - GT SEDAN	**Warranty Start Date :**	11/01/2004
BARS Order Type :	70 - RETAIL - STOCK		
Delivering Dealer :	STADIUM OLDSMOBILE-BUICK-PONTIAC-GMC TRUCK, INC. PO BOX 587 SALEM , OH 44460-0587 (330) 337-3488	**Selling Source :**	16 - PONTIAC
		Site Code :	06010
		Business Associate Code :	117150

Service Contract :	No	**Branded Title :**	Yes	**Warranty Block :**	Yes	**PDI Status :**	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
YT	04088	DRIVER DOOR WATER INTRUSION	N/A	Closed
RC	05005	REAR SEAT CHILD RESTRAINT ANCHORAGE OWNER MANUAL UPDATE	N/A	Closed

SERVICE INFORMATIONAL ITEMS

Type	Number	Description	Posted Date	Status
SB	06047	ONSTAR HARDWARE CAN BE UPGRADED TO DIGITAL. SEE TSB 05-08-46-006.	02/21/2007	See Bulletin

ON STAR AND XM SATELLITE RADIO INFORMATION

OnStar Equipped	Yes	**OnStar Status**	Inactive	Refer to Help page for details or:go to OnStar Online Enrollment (located on the "OnStar" tab in GM InfoNET) or (888)ONSTAR1 (888) 667-8271.		
XM Equipped	No	**XM Radio ID**	N/A	**XM Status**	N/A	Refer to Help page for details or: www.xmradio.gm.ca or Dealer Hotline 1.877.GET.XMST (1-877-438-9677).

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	11/01/2004	196 miles	11/01/2007	36196 miles

72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	11/01/2004	196 miles	11/01/2010	100196 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	11/01/2004	196 miles	11/01/2012	80196 miles
36/50000 CALIFORNIA EMISSIONS	11/01/2004	196 miles	11/01/2007	50196 miles
84/70000 CALIFORNIA SELECT COMPONENT	11/01/2004	196 miles	11/01/2011	70196 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
03/06/2006	100885	#	Y0014 - DRIVER DOOR WATER INTRUSION - REPROGRAM BODY CONTROL MODUL	25307 miles
03/06/2006	100885	#	B2780 - SUNROOF MODULE ASSEMBLY REPLACEMENT	25307 miles
10/12/2004	089295	I	Z6999 - PDI RELATED FLUID ADDS	11 miles
09/27/2004	A19331	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System
Claim History

VIN :	1G2ZH528754[redacted]

CLAIM HISTORY

Repair Order Date :	03/06/2006	Repair Order Number :	100885	Odometer Reading :	25307 miles

Serviced By :	STADIUM OLDSMOBILE-BUICK-PONTIAC-GMC TRUCK, INC. PO BOX 587 SALEM, OH 44460-0587 (330) 337-3488	Selling Source :	16 - PONTIAC
		Site Code :	06010
		Business Associate Code :	117150

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
03/10/2006	672	01	#	Y0014 - DRIVER DOOR WATER INTRUSION - REPROGRAM BODY CONTROL MODUL	N/A	N/A	N/A	$ 24.87	N
03/10/2006	672	02	#	B2780 - SUNROOF MODULE ASSEMBLY REPLACEMENT	N/A	N/A	N/A	$ 236.28	N

Repair Order Date :	10/12/2004	Repair Order Number :	089295	Odometer Reading :	11 miles

Serviced By :	STADIUM OLDSMOBILE-BUICK-PONTIAC-GMC TRUCK, INC. PO BOX 587 SALEM, OH 44460-0587 (330) 337-3488	Selling Source :	16 - PONTIAC
		Site Code :	06010
		Business Associate Code :	117150

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
10/19/2004	527	01	I	Z6999 - PDI RELATED FLUID ADDS	N/A	N/A	N/A	$ 7.00	N

Repair Order Date :	09/27/2004	Repair Order Number :	A19331	Odometer Reading :	0 miles

Serviced By :	STADIUM OLDSMOBILE-BUICK-PONTIAC-GMC TRUCK, INC. PO BOX 587 SALEM, OH 44460-0587 (330) 337-3488	Selling Source :	16 - PONTIAC
		Site Code :	06010
		Business Associate Code :	117150

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
10/01/2004	522	01	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	N/A	N/A	N/A	$ 75.67	N

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System
Vehicle Build

VIN	1G2ZH528754[redacted]

VEHICLE BUILD

Merchandising Model :	2ZH69 -2005 G6 - GT SEDAN		
Gross Vehicle Weight Rating :	2026 kg (4467 lb)	**Order Number :**	HMWT7B
Build Date :	09/27/2004	**Build Plant :**	154Z

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AG1 - DRIVER SEAT 6-WAY POWER	AK5 - FRONT SIDE IMPACT AIR BAGS & HEAD-CURTAIN SIDE AIR BAGS
AP3 - REMOTE VEHICLE STARTER SYSTEM	A51 - LEATHER PACKAGE: * LEATHER APPOINTED SEATING * 6-WAY POWER DRIVER SEAT * HEATED FRONT SEATS * LEATHER WRAPPED STEERING WHL * STEERING WHEEL RADIO CONTROLS * LEATHER WRAPPED SHIFT KNOB AND PARK BRAKE HANDLE
C3Y - PANORAMIC ROOF, POWER	C60 - AIR CONDITIONING, CUSTOM
DL5 - DECAL ROADSIDE SERVICE	D49 - POWER OUTSIDE REAR VIEW-MIRRORS
FE2 - SUSPENSION, SPORT	FR9 - AXLE RATIO 3.29
IB2 - LEATHER PACKAGE: * LEATHER APPOINTED SEATING * 6-WAY POWER DRIVER SEAT * HEATED FRONT SEATS * LEATHER WRAPPED STEERING WHL * STEERING WHEEL RADIO CONTROLS * LEATHER WRAPPED SHIFT KNOB AND PARK BRAKE HANDLE	JA7 - HANDLE, PARK BRAKE RELEASE LTHR
JL9 - BRAKES, 4-WHEEL DISC ANTILOCK W/TRACTION CONTROL	KA1 - HEATER SEAT, FRONT
KG7 - GENERATOR 125 AMP	LX9 - ENGINE, 3.5L V6 SFI
MN5 - TRANSMISSION 4SPEED	MX0 - 4-SPEED AUTOMATIC TRANSMISSION
NC7 - FEDERAL EMISSIONS OVERRIDE	NE1 - 50-STATE EMISSIONS
NR0 - STEERING WHEEL, LEATHER WRAPPED RIM	NU1 - CAL EMISSION SYSTEM, LEV2
NW9 - TRACTION CONTROL	ORN - ORION ASSY
PCH - PREMIUM VALUE PACKAGE INCLUDES: * (4)	PDD - CONVENIENCE PACKAGE INCLUDES: *

WHEELS, 17" CHROMETECH * AM/FM STEREO 6 DISC CD PLAYER (REPLACES STD/OPT/PKG RADIO) * PANORAMIC ROOF, POWER * ONSTAR SYSTEM-INCLUDES 1 YEAR SAFE & SOUND	MANUAL DRIVERS SEAT LUMBAR * SEATBACK MAP POCKETS * POWER SEAT HEIGHT ADJUSTER * ADJUSTABLE PEDALS * FLOOR MATS * CONVENIENCE NET
PFE - (4) WHEELS, 17" CHROMETECH	QWN - (4) P225/50/17 TOURING TIRES
R6J - CUSTOMER DIALOG NETWORK	SLM - SALES STOCK ORDERS
UC6 - AM/FM STEREO 6 DISC CD PLAYER (REPLACES STD/OPT/PKG RADIO)	UE1 - ONSTAR SYSTEM -INCLUDES 1 YEAR SAFE & SOUND
UK3 - STEERING WHEEL AUDIO CONTROL	U77 - REAR WINDOW ANTENNA
U85 - 8 SPEAKER MONSOON PREMIUM SOUND SYSTEM	VK3 - LICENSE PLATE BRACKET, FRONT
VM3 - BUMPER STD IMPACT 5 MPH FRT &RR	VY7 - SHIFTER, LEATHER WRAPPED
V73 - VEHICLE CERTIFICATION U.S.	1SZ - GT, PCH OPTION PKG DISCOUNT
19I - INT TRIM, EBONY	192 - EBONY
41U - BLACK	6AX - COMPONENT FRT LH COMPUT SEL SUS
7AX - COMPONENT FRT RH COMPUT SEL SUS	8AB - COMPONENT RR LH COMPUT SEL SUS
9AB - COMPONENT RR RH COMPUT SEL SUS	

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5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Susan Braun
Claim Administrator

August 1, 2008

[redacted]
Columbus, OH [redacted]

RE: Claimant: [redacted]
Our File No.: 657218
Our Client: General Motors Corporation
Date/Event: 11.19.2007
Subject vehicle: 2005 Pontiac G6
VIN: 1G2ZH528754[redacted]

Dear [redacted]

Please be advised that ESIS provides administrative claims handling services to General Motors Corporation in connection with product liability claims against GM. They have referred this claim to our office for further handling.

This will confirm our July 22, 2008 conversation regarding the above captioned matter. I have attempted to locate the subject 2005 Pontac G6 without success. Can you please attempt to obtain the current location of the subject vehicle? As explained during our conversation, it is necessary to inspect the subject vehicle in order for GM to respond to your inquiry.

Please call me with any questions, I can be reached at 1-800-888-0164.

Sincerely,

Susan Braun

Service Request Detail

SR No.	71-643957815	Ref No.		Goodwill	No Goodwill Offered	BRC Type	PAR
Account		Site		GW SubType		Bus. Unit	BRC
Last Name	[redacted]	First Name	[redacted]	Approval	Not Initiated	Area	PAR
Daytime #		Evening #		UCC	Steering - Power Steering Hose	Sub-Area	Initiate PAR- Collision
Address		City	Casiagrande	Involved Dir	Jones Auto Center, L.L.C.	Safety	Yes
State	AZ ZipCd [redacted]	Con Acct		Source	Phone	Updated	7/18/2008 01:31:20 PM
Serial #/VIN	1G2ZF55B664[redacted]	Model Year	2006	Priority	Medium License # PONTIAC	Owner	VALVERDM
Make	Pontiac	Warr. Start	12/15/2005	Status	Open	Opened	7/10/2008 01:44:25 PM
Model	G6	Mileage	49000	Sub-Status	Dissatisfied	Closed	
Abstract	Steering - Power Steering Hose						
Customer Description	brc par case please do not assume forward all inquiries to Mark Valverde ext 11215						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Driver	6/26/2008 05:02:38 PM	N	0	1	Asphalt	Dry	none	5901

Driver Last Name	Driver First Name	Height	DOB	Disabilities
[redacted]		5'9"	[redacted]	No

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Harmon	Ashley	(800) 833-2244	Daryland

Incident Loc	Highway 37	Incident Desc	5am I was going to work, I was passing a veh, and the steering didn't work, I had to turn but I couldn't, car went hard, wheels were hard, I ended up off the road, I had to avoid two veh, drop 2 feet about the road
Component	Electric Power steering		
Vehicle Loc	Jones Pontiac	Damage Desc	Three tires, underwheel all the pieces, quarter panel, touch up paint work
Emgcy Svc Names	Arizona DPS Officer Jay Reeves 208-034839	Add'l Info	* Claim # [redacted] with the insurance # * Agent at the Insurance Company phone# 1480867000
		Maint Loc	Jones Pontiac, and Gippy Louis.

PAR Detail

Collision	Y	Non Collision	Property Damage	N	Thermal Evt	N	Spec Equip	none	
Vehicle Speed	55		Weather Condition	clear and dry			Prop Owner	n/a	Property Type n/a
Last Service Date			Loc Last Service				Property Location	n/a	Prop Est Repair Cost
Veh Est Repair Cost			Spec Equip Installer				Prop Damage Description	n/a	
Primary Veh Use	Personal		Inspection Type				Inspected By	Inspection Not Performed	Inspection Date/Time
Veh Damage Description	3 tires blown out. quarter panel was scratched						Explain Other		

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/21/2008 09:42:49 AM	KINZERTH	KINZERTH	BRC PAR	ESIS- Insurance Involvement	Done	7/21/2008 09:43:22 AM	ESIS - Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Cust claims collision due to steering failure
File forwarded to ESIS

Thaddeus Kinzer/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/21/2008 09:41:24 AM	KINZERTH	ESISBIQU	Escalation	ESIS - Insurance Involvement	In Progress		ESIS - Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Cust claims collision due to steering failure
Insurance company repairing veh:
Agent - Ashley Harmon
Company - Daryland
Phone - (800) 833-2244
Claim Number - [redacted]

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/21/2008 08:51:56 AM	DRAHEICM	KINZERTH	Notify CRM		Done	7/21/2008 09:44:01 AM	ESIS-Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/18/2008 01:31:40 PM	VALVERDM	DRAHEICM	BRC PAR	ESIS- Insurance Involvement	Done	7/21/2008 08:51:55 AM	escalate

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

insurance company is repairing the vehicle. cust is seeking to get the vehicle paid off. cust states that steering failed and cuased accident.

Mark Valverde/PAR/ATX

Received and assigned for ESIS escalation.
Chad Drabeim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/17/2008 01:39:01 PM	VALVERDM	VALVERDM	Scheduled Outbound Call Cust		Scheduled Alarm		(71-643957815)

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

send to esis
(7-18)3-5pm

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/17/2008 01:24:25 PM	VALVERDM	VALVERDM	Inbound Call Customer	Customer	Done	7/17/2008 01:40:53 PM	cust called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

PAR INCIDENT QUESTIONNAIRE

• where was location of accident? state road 287 casagrand, AZ

• What was the vehicle speed? _____ 55 mph

• any concerns with the brakes? _____ none

was passing another vehicle and pull in front of the vehicle and had no power steering. did lose control of vehicle go off the road and went back on road went into a field. vehicle did go airborne and had hard landing

• Describe Damage to the vehicle- 3 tires blown out. quarter panel was scratched

• Police Report? yes #2008-034839
• How was vehicle removed from the scene - Was the vehicle towed or driven? _____jones bodyshop 520-836-2384
are u the original owner of the vehicle? used 20 k miles
where do you have the maint done on the vehicle? gm
When was last maint on the vehicle? dont know
what are you seeking from gm?cust is afraid of driving the vehicle. insurance company is repairing the vehicle. seeks to get the vehicle paid off. will send case to central claims.* Claim # [redacted] with the insurance #
* Agent at the Insurance Company phone# 1480867060. ashley harmon.
are there any injuries? none
weather cond? clear and dry

prim vehicle use? personal vehicle
spec equipment? aftermarket stereo

Mark Valverde/PAR/ATX

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/17/2008 01:23:21 PM	VALVERDM	VALVERDM	SR Opened		Done	7/17/2008 01:23:21 PM	SR in Status of Closed has been Re-Opened by VALVERDM

Contact Last Name	Contact First Name	Account	BAC Code

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/15/2008 12:25:32 PM	VALVERDM	VALVERDM	SR Closed - Dissatisfied		Done	7/15/2008 12:25:32 PM	Service Request has been Closed Dissatisfied.

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/15/2008 12:17:40 PM	VALVERDM	VALVERDM	Correspondence		Done	7/15/2008 12:17:40 PM	Created:BRCPAR_PA0005. SR#71-643957815

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/15/2008 12:04:48 PM	VALVERDM	VALVERDM	Outbound Call Customer	Left Message	Done	7/15/2008 12:07:40 PM	made call

Contact Last Name	Contact First Name	Account	BAC Code

Comments

did call cust but got voice mail so did leave message.

Mark Valverde/PAR/ATX

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/14/2008 04:17:00 PM	VALVERDM	VALVERDM	Outbound Call Customer	Left Message	Done	7/14/2008 04:19:28 PM	made call

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments
did call cust but got voice mail so did leave message.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 04:51:48 PM	VALVERDM	VALVERDM	Scheduled Outbound Call Cust	Cancelled - Completed Early	Done	7/15/2008 12:24:14 PM	(71-643957815)

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments
initial call
(7-14)3-5pm

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:52:31 PM	DRAHEICM	VALVERDM	Ownership Changed		Done	7/11/2008 12:52:31 PM	Service Request Ownership has changed FROM: DELAFUAL TO: VALVERDM

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:52:13 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- Phone	Done	7/14/2008 04:19:51 PM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments
made call attempts

Mark Valverde/PAR/ATX

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:52:06 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- Dealer	Done	7/14/2008 04:21:44 PM	called

Contact Last Name	Contact First Name	Account	BAC Code

Comments

did try calling the service manager but there line was busy.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:52:00 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- AVM	Done	7/14/2008 04:26:13 PM	called

Contact Last Name	Contact First Name	Account	BAC Code

Comments

did call dvm/paul zbjonowitz and let him know that cust vehicle was in accident and they allege that their steering failed. may be seeking inspection.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:51:55 PM	DRAHEICM	VALVERDM	BRC PAR	Acknowledgement	Done	7/11/2008 04:51:39 PM	called

Contact Last Name	Contact First Name	Account	BAC Code

Comments

did call cust but he was not home did leave message.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:51:51 PM	DRAHEICM	VALVERDM	Notify CRM		Done	7/11/2008 05:02:48 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:51:45 PM	DRAHEICM	VALVERDM	Research		Done	7/15/2008 12:03:22 PM	research vin

Contact Last Name	Contact First Name	Account	BAC Code

did look in gmvis and found no open recalls, no repairs made to the brake system. found no other cases.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 12:51:33 PM	DRAHEICM	VALVERDM	BRC PAR	Case Assigned	Done	7/15/2008 12:23:23 PM	assigned to mark valverde ext 11215

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 10:42:43 AM	DRAHEICM	DELAFUAL	SR Opened		Done	7/11/2008 10:42:43 AM	SR in Status of Closed has been Re-Opened by DRAHEICM

Contact Last Name	Contact First Name	Account	BAC Code

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/11/2008 10:42:41 AM	DRAHEICM	DELAFUAL	SR Closed - Dissatisfied		Done	7/11/2008 10:42:41 AM	Service Request has been Closed Dissatisfied.

Contact Last Name	Contact First Name	Account	BAC Code

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 02:22:54 PM	DELAFUAL	DRAHEICM	Escalation	Initiate PAR	Done	7/11/2008 10:42:20 AM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days."

Uma Davis/Tier 1/CAC/BA/Lvl 1 Emp

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 02:16:57 PM	DELAFUAL	DELAFUAL	Inbound Call Customer	Complex Request	Done	7/10/2008 02:21:52 PM	Cust Funnel

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Cust Sts: [redacted] cust's mother) We had Problems with the electric power steering, at the dlr they said Nothing wrong it, it's Interminent. But now my son was involved in an accident, he was passing a veh. We had asked when in warranty to Replace that unit, but No codes were found so they couldn't do that.

Owner Specific: (Cust on the phone)
Orig owner? N
Primary driver? Y
Personal or business use? Personal

Veh Specific:
Where purchased? New Begginning. AZ
If 2nd Owner of Veh, when/what mlg? 20000 miles. About a year ago.
Current approx mlg? 49.000
Ext Svc Plan? Y. Roadside 48.000 Service Contract something. Not sure

Concern Specific:
Concern? electric power steering. It's interminent. It will go loose or it would go off
When 1st notice concern? 6 months after I got it
What conditions does concern occur? Normal driving or before starting the veh. Whenever.
Where diagnosed? Jones
Est cost of the repair? $1500
Current location of veh? Jones
Veh repaired? If yes, cost & where completed? Not yet
If not GM dlr, phone # of repair facility?
What has Dlr told you about a diagnosis? Who was working with you? Rick

Business Decision:
Where maint performed? Jones and Independent
Prev GM veh? N
Prev related repairs? When? No

Out of Pocket expense: No, only tires and brakes.

Cust Sks: A safe veh, to get out of this one, but I own $21000

CRS adv: BRC agent will call you within 24-48 hs.

Uma Davis/Tier 1/CAC/BA/Lvl 1 Emp

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/10/2008 01:47:16 PM	DELAFUAL	DELAFUAL	Outbound Call Dealer	Made Contact	Done	7/10/2008 02:16:56 PM	Dlr Funnel

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS spoke w/: Rick

CRS adv: It's abou[redacted]s veh. Cust stated that she took the veh for diagnosis since she has an interment concern with the electric power steering. Can I have some more details, please.
Dlr sts: We program a key for it. We did an Inspection August 31st, 07. It's an used car co, bought at a dlr that is like a sister to ours. The Steering went out on the cust. But we found No Issues. Steering Concern not duplicated. 35310 miles back then.
Diagnosis? Concern not duplicated
Maint at dlr? I don't know
Misuse/Abuse/Lack of maint? Usually not. Ihaven't seen the veh yet

Uma Davis/Tier 1/CAC/BA/Lvl 1 Emp

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M04	Inoperative	Steering - Power Steering Hose

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZF55B664[redacted]

VEHICLE INFORMATION

Merchandising Model :	2ZF69 -2006 G6 - 4CYL SEDAN	Warranty Start Date :	12/15/2005
BARS Order Type :	50 - FLEET		
Delivering Dealer :	HENRY BROWN BUICK PONTIAC GMC 1550 E DRIVERS WAY GILBERT , AZ 85297-0402 (480) 835-0900	Selling Source :	16 - PONTIAC
		Site Code :	24515
		Business Associate Code :	210275

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
YT	07131	SERVICE UPDATE-INV/CUST-OBD SYS IMPROVE-REPROG PCM-EXP W/8YR/80K MILE ECM WARR	06/25/2007	Open

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	12/15/2005	10 miles	12/15/2008	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	12/15/2005	10 miles	12/15/2011	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	12/15/2005	10 miles	12/15/2013	80010 miles
36/50000 CALIFORNIA EMISSIONS	12/15/2005	10 miles	12/15/2008	50010 miles
84/70000 CALIFORNIA SELECT COMPONENT	12/15/2005	10 miles	12/15/2012	70010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading

08/30/2007	P04026	#	Z2080 - ROADSIDE SERVICE (TOWING)	30000 miles
01/23/2006	385950	#	J6360 - POWERTRAIN CONTROL MODULE REPLACEMENT	9 miles
12/14/2005	A23629	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System
Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G2ZF55B664[redacted]

CLAIM HISTORY

Repair Order Date :	08/30/2007	Repair Order Number :	P04026	Odometer Reading :	30000 miles

Serviced By :	GM ROADSIDE ASSISTANCE/CCAS ONE CABOT RD MEDFORD, MA 02155-5117	Selling Source :	16 - PONTIAC
		Site Code :	34415
		Business Associate Code :	207453

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
09/07/2007	828	01	#	Z2080 - ROADSIDE SERVICE (TOWING)	N/A	C	N/A	$ 58.94	N

Repair Order Date :	01/23/2006	Repair Order Number :	385950	Odometer Reading :	9 miles

Serviced By :	HENRY BROWN BUICK PONTIAC GMC 1550 E DRIVERS WAY GILBERT, AZ 85297-0402 (480) 835-0900	Selling Source :	16 - PONTIAC
		Site Code :	24515
		Business Associate Code :	210275

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
02/24/2006	668	01	#	J6360 - POWERTRAIN CONTROL MODULE REPLACEMENT	12603530 - ECM	N/A	N/A	$ 366.39	Y

Repair Order Date :	12/14/2005	Repair Order Number :	A23629	Odometer Reading :	0 miles

Serviced By :	HENRY BROWN BUICK PONTIAC GMC 1550 E DRIVERS WAY GILBERT, AZ 85297-0402 (480) 835-0900	Selling Source :	16 - PONTIAC
		Site Code :	24515
		Business Associate Code :	210275

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
12/20/2005	649	01	I	Z7000 - PRE-DELIVERY	N/A	N/A	N/A	$ 101.92	N

				INSPECTION - BASE TIME					

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System
Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN	1G2ZF55B664[redacted]

VEHICLE BUILD

Merchandising Model :	2ZF69 -2006 G6 - 4CYL SEDAN		
Gross Vehicle Weight Rating :	1922 kg (4238 lb)	**Order Number :**	JPNVVQ
Build Date :	12/14/2005	**Build Plant :**	164Z

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AK5 - FRONT SIDE IMPACT AIR BAGS	AP8 - KEYLESS ENTRY, REMOTE
A51 - SEAT, FRONT 45/45 BUCKET	B9A - VEHICLE GM PROD WEEK 51
C1U - FLT-ENTERPRISE RENT A CAR	C60 - AIR CONDITIONING, CUSTOM
DL5 - DECAL ROADSIDE SERVICE	D49 - POWER OUTSIDE REAR VIEW-MIRRORS
FAD - SIMULATED WALNUT BURL ACCENTS	FE0 - SUSPENSION, TOURING
FLT - FLT-FLEET ORDERS	FX2 - AXLE RATIO 3.91
IBB - TRIM INTERIOR DESIGN	J66 - BRAKES, 4-WHEEL DISC
KG7 - GENERATOR 125 AMP	K34 - CRUISE CONTROL, ELECTRONIC
LE5 - ENGINE, 2.4L HO 4-CYL DOHC MFI	MN5 - TRANSMISSION 4SPEED
MX0 - AUTOMATIC TRANSMISSION	NC7 - FEDERAL EMISSIONS OVERRIDE
NU1 - CAL EMISSION SYSTEM, LEV2	N45 - STEERING WHEEL 3 SPOKES
ORN - ORION ASSY	PDC - CRUISE & RKE PACKAGE INCLUDES: * CRUISE CONTROL, ELECTRONIC *KEYLESS ENTRY, REMOTE
QC1 - (4) WHEELS, 16" STEEL W/BOLT-ON COVER	QPE - (4) P215/60/16 TOURING TIRES
R6F - IDENTIFY B CODE USERS	R6P - PREMIUM PAINT
R9C - ALLOW NON RETAIL REQ. FOR FLEET	UZ6 - 6 SPEAKER SOUND SYSTEM
U1C - AM/FM CD STEREO W/CLOCK & DRIVER INFORMATION CENTER	U77 - REAR WINDOW ANTENNA
VQ2 - FLEET ORDERING AND ASSISTANCE	VX7 - LONG TERM DAILY RENTAL PROGRAM
V2G - CREDIT IN LIEU OF FUEL	V73 - VEHICLE CERTIFICATION U.S.

YF5 - 50-STATE EMISSIONS	1SA - OPTION GROUP - 1SA
1SZ - OPTION PACKAGE DISCOUNT	15U - SEDONA BEIGE METALLIC
6AK - COMPONENT FRT LH COMPUT SEL SUS	7AK - COMPONENT FRT RH COMPUT SEL SUS
70B - LIGHT TAUPE	70I - TRIM, LIGHT TAUPE
8AB - COMPONENT RR LH COMPUT SEL SUS	9AB - COMPONENT RR RH COMPUT SEL SUS

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ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Nancy Johnson
Claims Administrator

August 6, 2008

[redacted]

Castagrande, AZ [redacted]

RE: Claimant: [redacted]
Our File No.: 657526
Our Client: General Motors Corporation
Date/Event: 6/26/08
Subject vehicle: 2006 Pontiac G6
VIN: 1G2ZF55B664[redacted]

Dear [redacted]

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors. Your correspondence alleges that you sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

***** IF INSURANCE COMPANY OR AN ATTORNEY IS REPRESENTING YOU, PLEASE FORWARD THIS LETTER TO THE APPROPRIATE PARTY FOR FURTHER HANDLING*****

1. Please provide a **copy** of your expert report and **color copies** of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

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7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage **estimate** and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Nancy Johnson
Claims Administrator

Service Request Detail

SR No.	71-647904476	Ref No.		Goodwill	No Goodwill Offered	BRC Type	PAR
Account	[redacted]	Site		GW SubType		Bus. Unit	BRC
Last Name		First Name	[redacted]	Approval	Not Initiated	Area	PAR
Daytime #		Evening #		UCC	Steering - Power Steering Pump /	Sub-Area	Initiate PAR- Collision
Address		City	Dalton	Involved Dir	Edd Kirby Chevrolet, Inc.	Safety	Yes
State	GA ZipCd	Coll Acct		Source	Phone	Updated	7/28/2008 11:14:04 AM
Serial #/VIN	1G1ZT61846F[redacted]	Model Year	2006	Priority	Medium License #	Owner	VALVERDM
Make	Chevrolet	Warr. Start	09/16/2005	Status	Open	Opened	7/24/2008 11:06:53 AM
Model	Malibu MAXX	Mileage	45848	Sub-Status	Dissatisfied	Closed	
Abstract	Steering - Power Steering Pump / Brackets						
Customer Description	brc par case please do not assume forward all inquiries to Mark Valverde ext 11215						

Pre-PAR

PAR Notifier	Incident Date/Time	Injuries	# Other Veh	# People in Veh	Road Surface	Road Cond.	Fire Report#	Police Report#
Owner	7/23/2008 02:15:22 PM	N	0	1	Gravel	Dry	none	none

Driver Last Name	Driver First Name	Height	DOB	Disabilities
[redacted]		5'11	[redacted]	low blood pressure

Insurance Agent Last Name	Insurance Agent First Name	Phone #	Insurance Agency
Sinlard	Ronny	[redacted]	Cotton States

Incident Loc	edge of my driveway	Incident Desc	when i came to pick up my mail, when i turned back into my other drive, the power steering locked up, and i couldnt straighten it to stay in the drive way and i hit a tree.
Component	power steering locked up.		
Vehicle Loc	with customer	Damage Desc	bumper and fender with a big dent, pushed the fiberglass into the headlights.
Emgcy Svc Names	none	Add'l Info	Policy # for insurance [redacted]
		Maint Loc	EDD KIRBY S ADVENTURE CHEVROLET

PAR Detail

Collision	Y	Non Collision	Property Damage	N	Thermal Evt	N	Spec Equip	none	
Vehicle Speed	15		Weather Condition	dry and cool			Prop Owner	n/a	Property Type n/a
Last Service Date	7/1/2008		Loc Last Service				Property Location	n/a	Prop Est Repair Cost
Veh Est Repair Cost			Spec Equip Installer				Prop Damage Description	n/a	
Primary Veh Use	Personal		Inspection Type				Inspected By	Inspection Not Performed	Inspection Date/Time
Veh Damage Description	scratches and dents to the front bumper.						Explain Other		

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/28/2008 11:15:27 AM	MARQUEMO	MARQUEMO	BRC PAR	ESIS- Insurance Involvement	Done	7/28/2008 11:17:06 AM	ESIS- Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

File fowarded to ESIS due to cust was involved in a collision and allegation is steering and insurance company repaired veh and cust sks reimbursement for insurance deductable.

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/28/2008 11:14:11 AM	MARQUEMO	ESISBIQU	Escalation	ESIS - Insurance Involvement	In Progress		Assign to ESIS

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Insurance Involvement - sks reimbursement for insurance deductable

Monica Marquez/BRCPAR/ATX
x21072

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/28/2008 10:34:36 AM	DRAHEICM	MARQUEMO	Notify CRM		Done	7/28/2008 11:14:09 AM	ESIS-Insurance Involvement

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/25/2008 02:44:57 PM	VALVERDM	DRAHEICM	BRC PAR	ESIS- Insurance Involvement	Done	7/28/2008 10:34:35 AM	escalate to esis

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Insurance company is going to repair the vehicle. seeking reimbursement for deductible.

cotton states insurance
agent ronny sinlard
706-278-7329
[redacted]

Mark Valverde/PAR/ATX

Received and assigned for ESIS escalation.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/25/2008 02:44:12 PM	VALVERDM	VALVERDM	Ownership Changed	Ownership Escalated to BRC	Done	7/25/2008 02:44:12 PM	Ownership Escalated to BRC

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 04:50:17 PM	VALVERDM	VALVERDM	Inbound Call Customer	Customer	Done	7/24/2008 04:51:32 PM	cust called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

PAR INCIDENT QUESTIONNAIRE

• where was location of accident? was in driveway at home

• What was the vehicle speed? _____ 15 mph

• any concerns with the brakes? _____ none

was going to pick up the mail and tried turning the vehicle and vehicle kept on going straight and hit tree.

• Describe Damage to the vehicle- scratches and dents to the front bumper.

• Police Report? none
• How was vehicle removed from the scene - Was the vehicle towed or driven? _____vehicle is at home
are u the original owner of the vehicle? yes
where do you have the maint done on the vehicle? kirby chevrolet
When was last maint on the vehicle? 2 weeks ago
what are you seeking from gm?insurance company is going to repair the vehicle and cust has to pay deductible. seeking reimbursement for deductible.
are there any injuries? none
weather cond? dry and cool

prim vehicle use? personal vehicle
spec equipment? none

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 04:23:35 PM	VALVERDM	VALVERDM	Scheduled Follow-up		Scheduled Alarm		(71-847904476)

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

send to esis
(7-25)3-5pm

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:40:08 PM	DRAHEICM	VALVERDM	Ownership Changed		Done	7/24/2008 12:40:08 PM	Service Request Ownership has changed FROM: CONNORMA TO: VALVERDM

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:51 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- Phone	Done	7/25/2008 02:20:48 PM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

cust called in see inbound activity.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:45 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- Dealer	Done	7/25/2008 02:29:47 PM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

did call service manager but got voice mail so did leave message.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:38 PM	DRAHEICM	VALVERDM	BRC PAR	Initial Contact- AVM	Done	7/25/2008 02:33:58 PM	called

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

did call jeff sullivan/dvm and let him know that cust vehicle was in an accident and thinks the steering failed. may be seeking an inspection.

Mark Valverde/PAR/ATX

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:33 PM	DRAHEICM	VALVERDM	BRC PAR	Acknowledgement	Done	7/24/2008 04:23:31 PM	callead

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

did call cust but got voice mail so did leave message.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:28 PM	DRAHEICM	VALVERDM	Notify CRM		Done	7/24/2008 04:35:45 PM	file assigned

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:23 PM	DRAHEICM	VALVERDM	Research		Done	7/25/2008 02:40:52 PM	research vin

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

did look in gmvis and found no open recalls. no repairs made to the steering system. found no other cases.

Mark Valverde/PAR/ATX

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 12:39:07 PM	DRAHEICM	VALVERDM	BRC PAR	Case Assigned	In Progress		assigned to mark valverde ext 11215

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

Confidential Comments

Service Request Detail

Activities

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 11:37:49 AM	CONNORMA	DRAHEICM	Escalation	Initiate PAR	Done	7/24/2008 12:21:55 PM	Assigning activity to PAR QUEUE

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

Comments

CRS advised that a person from the PAR Department will contact the customer within 2 business days.

Mary Connors/CAC/STJ/T1

Received and assigned in PAR.
Chad Draheim/ATX/Workflow PAR

Confidential Comments

Created	Created By	Assigned To	Activity Type	Activity Sub-Type	Status	Completed	Description
7/24/2008 11:15:15 AM	CONNORMA	CONNORMA	Inbound Call Customer	Complex Request	Done	7/24/2008 11:37:48 AM	Alleged product allegation - has a trouble with the power steering.

Contact Last Name	Contact First Name	Account	BAC Code
[redacted]			

cust sts: I had a problem with my power steering, I went to the dealership and they said there was nothing wrong, well yesterday I got into a collison with a tree. when I went to turn back into my driveway the power steering locked up on me, and would not let me stay straight so I hit a tree.

cust sks: file complaint and report accident.

CRS adv: customer that their information will be forwarded to the Product Allegation Department within the BRC.

Mary Connors/CAC/STJ/T1

Confidential Comments

UCC Information

UCC Code	Symptom	Description
M30	No Symptom Indicated	Steering - Power Steering Pump / Brackets

[redacted]

GM Vehicle Inquiry System
Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZT61846F[redacted]

VEHICLE INFORMATION

Merchandising Model :	1ZT68 -2006 MALIBU MAXX LT	Warranty Start Date :	09/16/2005
BARS Order Type :	50 - FLEET		
Delivering Dealer :	EDD KIRBY S ADVENTURE CHEVROLET PO BOX 369 DALTON , GA 30722-0369 (706) 278-1122	Selling Source :	13 - CHEVROLET
		Site Code :	08344
		Business Associate Code :	112500

Service Contract :	No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Vehicle Has No Current Record Of Outstanding Campaigns

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	09/16/2005	10 miles	09/16/2008	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	09/16/2005	10 miles	09/16/2011	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	09/16/2005	10 miles	09/16/2013	80010 miles
36/36000 FEDERAL EMISSION	09/16/2005	10 miles	09/16/2008	36010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
09/06/2007	110993	#	N6624 - WIRING AND/OR CONNECTOR - OCCUPANT SAFETY -	38541 miles

[redacted]

			REPAIR OR REPL	
09/15/2005	A29279	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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[redacted]

GM Vehicle Inquiry System
Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN :	1G1ZT61846F[redacted]

CLAIM HISTORY

Repair Order Date :	09/06/2007	Repair Order Number :	110993	Odometer Reading :	38541 miles

Serviced By :	EDD KIRBY S ADVENTURE CHEVROLET PO BOX 369 DALTON, GA 30722-0369 (706) 278-1122	Selling Source :	13 - CHEVROLET
		Site Code :	08344
		Business Associate Code :	112500

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
09/21/2007	832	01	#	N6624 - WIRING AND/OR CONNECTOR - OCCUPANT SAFETY - REPAIR OR REPL	N/A	A	N/A	$ 36.39	N

Repair Order Date :	09/15/2005	Repair Order Number :	A29279	Odometer Reading :	0 miles

Serviced By :	EDD KIRBY S ADVENTURE CHEVROLET PO BOX 369 DALTON, GA 30722-0369 (706) 278-1122	Selling Source :	13 - CHEVROLET
		Site Code :	08344
		Business Associate Code :	112500

Cycle Date	Cycle Nbr	Case	Type	Labor Operation	Part	Auth Code	Person Code	Line Total	Comments
09/20/2005	623	01	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	N/A	N/A	N/A	$ 79.30	N

CHECK HISTORY

Vehicle Has No Associated Check History.

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[redacted] 7/28/2008

GM Vehicle Inquiry System
Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

VIN	1G1ZT61846F[redacted]

VEHICLE BUILD

Merchandising Model :	1ZT68 -2006 MALIBU MAXX LT		
Gross Vehicle Weight Rating :	2023 kg (4461 lb)	**Order Number :**	JHSSQ1
Build Date :	09/15/2005	**Build Plant :**	16FZ

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

AK5 - AIR BAGS, DUAL-STAGE FRONT, DRIVER & PASSENGER	A51 - SEATS, CUSTOM
B0U - GM PRODUCTION WEEK #37	C1U - FLT-ENTERPRISE RENT A CAR
C60 - AIR CONDITIONING	DL5 - ROADSIDE SERVICE INFORMATION DECAL
DL6 - POWER O/S MIRRORS, BODY COLOR	FAI - FAIRFAX
FE0 - SUSPENSION SYSTEM-ACTIVE	FE9 - 50-STATE EMISSIONS
FLT - FLEET PROCESSING OPTION	FR9 - TRANSAXLE 3.29 RATIO
IBC - INTERIOR TRIM	JL9 - 4-WHEEL ANTI-LOCK DISC BRAKES W/TRACTION CONTROL
K64 - GENERATOR 115 AMPS	LX9 - 3.5L V6 ENGINE
MN5 - 4-SPEED AUTO TRANSMISSION	MX0 - 4-SPEED AUTO TRANSMISSION
NT7 - EMISSION SYSTEM FEDERAL, TIER 2	NZ6 - (4) 16" WHEELS W/SILVER PAINTED COVERS
N46 - STEERING WHEEL (REPLACES LEATHER WRAPPED STEERING WHEEL)	QPE - (4) TOURING TIRES P215/60R16
R6F - IDENTIFY B-CODE USERS	R6P - PREMIUM PAINT
UN0 - AM/FM STEREO W/CD & RDS (REPLACES STD/OPT/PKG RADIO)	UZ6 - SIX PREMIUM SPEAKERS
U73 - FIXED MAST ANTENNA	VQ2 - FLEET ORDERING AND ASSISTANCE
VX7 - LONG TERM DAILY RENTAL PROGRAM	V2G - FULL FUEL FILL CREDIT
V73 - STATEMENT OF VEHICLE CERT.- U.S. /CANADA	1SZ - OPTION PACKAGE DISCOUNT

[redacted]

2LT - 2LT PACKAGE	6AR - FRONT SPRING
7AR - FRONT SPRING	8AB - REAR SPRING
83C - TITANIUM	83I - INTERIOR TRIM
88U - MEDIUM GRAY METALLIC	9AB - REAR SPRING

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5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Matthew Fruth
Claims Administrator

July 31, 2008

[redacted]

Dalton, GA [redacted]

RE: Claimant: [redacted]
Our File No.: 657851
Our Client: General Motors Corporation
Date/Event: 7/23/2008
Subject vehicle: 2006 Malibu Maxx
VIN: 1G1ZT61846F[redacted]

Dear [redacted]

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors. Your correspondence alleges that you sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

***** IF INSURANCE COMPANY OR AN ATTORNEY IS REPRESENTING YOU, PLEASE FORWARD THIS LETTER TO THE APPROPRIATE PARTY FOR FURTHER HANDLING*****

1. Please provide a **copy** of your expert report and **color copies** of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

5

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents.
If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage **estimate** and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Matthew Fruth
Claims Administrator

esis

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Matthew Fruth
Claims Administrator

July 31, 2008

[redacted]
Dalton, GA[redacted]

RE: Claimant: [redacted]
Our File No.: 657851
Our Client: General Motors Corporation
Date/Event: 7/23/2008
Subject vehicle: 2006 Malibu Maxx
VIN: 1G1ZT61846F[redacted]

Dear[redacted]

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1. Please provide a copy of your expert report and color copies of photos taken by your expert. Please do not send originals, as they may not be returned.

2. A copy of the police and/or fire report.

3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.

4. Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.

5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

esis

6. Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.

8. Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.

9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.

10. Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage estimate and your total loss work sheet.

11. Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Matthew Fruth
Claims Administrator

5

ESIS/GM Central Claims Unit
P.O. Box 300
Mail Code 482 C19 B61
Detroit, MI 48265-3000

800.888.0164 *tel*
313.665.0911 *fax*

Bethany Tillman
Claims Administrator

November 10, 2008

[redacted]

Dalton, GA[redacted]

RE: Claimant: [redacted]
Our File No.: 657851
Our Client: General Motors Corporation
Date/Event: 7/23/2008
Subject vehicle: 2006 Malibu Maxx
VIN: 1G1ZT61846F[redacted]

Dear[redacted]

This will have reference to the above product liability subrogation claim that you filed with General Motors Corporation.

I have thoroughly reviewed the documentation provided to date in support of your subrogation claim. However, our file reflects that we have not been provided with your specific technical documentation, which supports your theory of liability as being that of General Motors Corporation.

Correspondence that was sent to you on 7/31/2008 requested specific information, which would enable us to perform our evaluation. Unless we are provided with the requested supporting technical documentation within thirty (30) days from the date of this letter, we will be unable to take further action in this matter and I will have to close our file. Finally, if it is your intention to pursue this matter further, you will be responsible for preserving the subject vehicle and/or defective component in their immediate post loss condition.

Thank you for your time and attention in this regard.

Sincerely,

Bethany Tillman
Claims Administrator